

U.S. Department of Homeland Security
Washington, DC 20529



U.S. Citizenship
and Immigration
Services

January 12, 2023

To: Jon A. Longo
501 S. Flagler Drive, Suite 500
West Palm Beach, FL 33401

From: Hialeah Field Office (HIA)

Regarding: Certified True Copy(ies) dated January 12, 2023

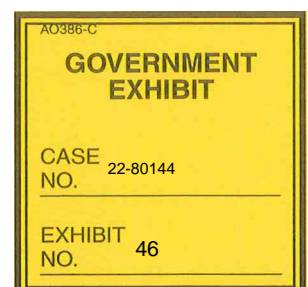
Dear Jon A. Longo,

Certified True Copy of ELIS N-400 application & interview for Joff Stenn Wroy Philossaint (Receipt # IOE0908647692)

Subject name: PHILOSSAINT, JOFF STENN WROY

File/CertificateNumber: IOE0908647692 (Primary), 42248202 (Certificate)

Jobernia Wyche-Francis
Supervisory Immigration Services Assistant
Hialeah Field Office (HIA)





Certification of Documents
Department of Homeland Security
 U.S. Citizenship and Immigration Services

USCIS
Form G-24
 Internal Use

United States of America

Department of Homeland Security
U.S. Citizenship and Immigration Services

01/12/2023

Date (mm/dd/yyyy)

Certification of Documents
 (Originals or Copies thereof)

BY VIRTUE OF the authority vested in me by Title 8, Code of Federal Regulations, Part 103 of the Immigration and Nationality Act (INA), and Title IV, Subtitle E, Section 451 and Section 456 of the Homeland Security Act of 2002,

I HEREBY CERTIFY that the annexed documents are originals, or copies thereof, from the records of U.S. Citizenship and Immigration Service, Department of Homeland Security, which the Secretary is the legal custodian by virtue of Section 103 of the Immigration and Nationality Act. These documents relate to:

Subject: PHILOSSAINT, JOFF STENN WROY

Also known as (aka): Additional Names Provided in Account Data.

File and/or Certificate Number: IOE0908647692 (Primary), 42248202 (Certificate)

Number of Pages Copied:

Annotations

 Signature of Authorized Person

Jobernia Wyche-Francis, Supervisory Immigration Services Assistant

 Print Name and Title of Authorized Person

Hialeah Field Office (HIA)

 Office of Authorized Person



USCIS Electronic Immigration System

Certified True Copy

USCIS OFFICIAL RECORD

Created: Thu Jan 12 12:43:39 EST 2023

Case Summary

Person Name	PHILOSSAINT, JOFF STENN WROY
A-Number	A208075457
Birth Date	██████ 1990
Gender	Male
USCIS Receipt Number	IOE0908647692
Receipt Date	03/10/2020
Benefit Type	N-400
Case State	Closed
Case Status	Closed - Certificate Issued
Case Substatus	Closed - Certificate Issued

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Account Data

Name(s)

Name	Type	Source	Primary
PHILOSSAINT, JOFF STENN WROY	Legal Name	Declared at Submission	Yes
PHILOSSAINT, JOFF STENN WROY	Alias	Updated by Internal User	No
PHILOSSAINT, JOFF STENN NMN	Alias	Central Index System	No
PHILOSSAINT, JOFF NMN	Alias	Central Index System	No
PHILOSSAINT, JOFF STENN WROY	Permanent Resident Card	Updated by Internal User	No

Date(s) of Birth

Birth Date	Source	Primary
1990	Declared at Submission	Yes

Alien Number(s)

Alien Number	Source	Primary
A208075457	Declared at Submission	Yes

Contact Information

Physical Address(es)

Address	Dates Used	Input Date	Source	Primary
[REDACTED], MIAMI, FL, [REDACTED]	06/01/2017 - Present	03/13/2020	Declared at Submission	Yes
[REDACTED], MIAMI, FL, [REDACTED]	01/10/2016 - 06/01/2017	03/13/2020	Declared at Submission	No

Mailing Address(es)

Address	Dates Used	Input Date	Source	Primary
In Care Of: ALEX TELFORT [REDACTED], MIAMI, FL, [REDACTED]	Unknown - Present	03/13/2020	Declared at Submission	Yes

Phone Number(s)

Phone Number	Type	Input Date	Source	Primary
(305) 680-6786	Daytime	03/13/2020	Declared at Submission	Yes
(305) 680-6786	Cell/Mobile SMS Phone	03/13/2020	Declared at Submission	Yes
(305) 680-6786	Work Phone	03/13/2020	Declared at Submission	Yes
(305) 680-6786	Evening Phone	03/13/2020	Declared at Submission	Yes

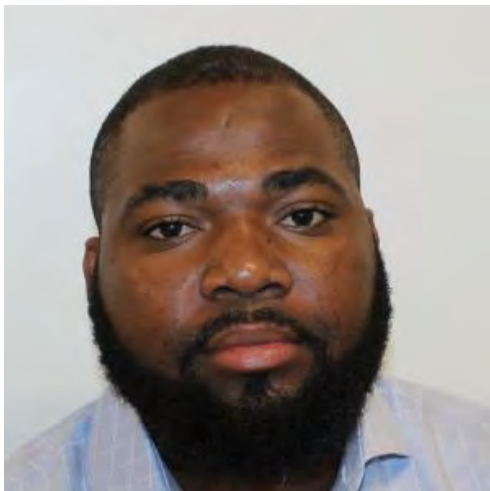
Email Address(es)

Email Address	Input Date	Source	Primary
JSWPHILOSSAINT@GMAIL.COM	03/13/2020	Declared at Submission	Yes

Biometrics

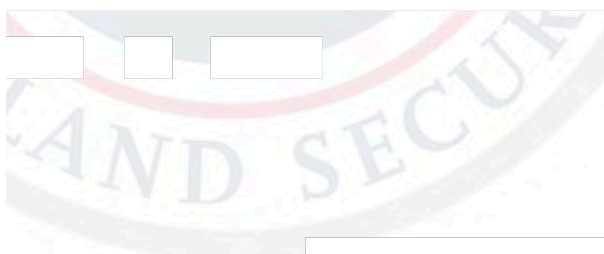
Transaction ID	Capture Date
IOE09086476920202010280819	10/28/2020 16:18:54 UTC

Photograph



Fingerprint

Fingerprint Position	Fingerprint Waived?
RI	No



Signature

Signature Waived
No

A handwritten signature in black ink, appearing to be 'J. B. Smith' or similar, written in a cursive style.

Oath

Interview Oath

Initial Interview

Start date	End Date	Applicant Appearance	Applicant Oath	Recorded?
12/15/2020	12/15/2020	Completed	Applicant took oath	N/A

Naturalization Test

Naturalization Test Details

Test Date	Exemptions	Due Consideration and Interpreter	Exceptions
12/15/2020	None	Due Consideration: No Interpreter Language: None	Not Present

English and Civics Test Results

Test Date	Civics	Read English	Speak English	Write English	Understand English
12/15/2020	Pass	Pass	Pass	Pass	Pass

Civics Test Results

U.S. History and Government (Civics)

Correct: 6 | Incorrect: 0 The applicant has passed the civics test - 12/15/2020

1. Who wrote the Declaration of Independence?

Provided Answer	Results	Response Date
Jefferson	Correct	12/15/2020

2. Who vetoes bills?

Provided Answer	Results	Response Date
President	Correct	12/15/2020

3. What is the name of the Speaker of the House of Representatives now?

Provided Answer	Results	Response Date
Nancy Pelosi	Correct	12/15/2020

4. What ocean is on the West Coast of the United States?

Provided Answer	Results	Response Date
Pacific	Correct	12/15/2020

5. What is the name of the President of the United States now?

Provided Answer	Results	Response Date
Donald Trump	Correct	12/15/2020

6. What is the capital of the United States?

Provided Answer	Results	Response Date
Washington DC	Correct	12/15/2020

7. What is one responsibility that is only for United States citizens?

Provided Answer	Results	Response Date
None	Not Asked	12/15/2020

8. When was the Declaration of Independence adopted?

Provided Answer	Results	Response Date
None	Not Asked	12/15/2020

9. Who is one of your state's U.S. Senators now?

Provided Answer	Results	Response Date
None	Not Asked	12/15/2020

10. Name your U.S. Representative.

Provided Answer	Results	Response Date
None	Not Asked	12/15/2020

Reading Test Results

English - Reading Standard Test Form 2

Correct: 1 | Incorrect: 0 The applicant has passed the reading test - 12/15/2020

1. How many Senators do we have?

Results	Response Date
Correct	12/15/2020

2. What is the largest state?

Results	Response Date
Not Asked	12/15/2020

3. Why do people want to be a citizen?

Results	Response Date
Not Asked	12/15/2020

Writing Test Results

English - Writing Standard Test Form 2

Correct: 1 | Incorrect: 0 The applicant has passed the writing test - 12/15/2020

1. We have one hundred Senators.

Results	Response Date
Correct	12/15/2020

Uploaded Response:

Please write the sentence here.

WE HAVE
ONE HUNDRED
SENATORS

A-Number: 208075457 | Receipt Number: IOE0908647692

Page 1 of 2

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12/15/2020

12/15/2020

Interview

Information About You

Alien Number

A-Number	Source	Updated By	Updated Date	Primary
A208075457	Declared at Submission	LOCKBOX	03/13/2020	Yes

Admission

Basis of Eligibility	Section of Law	Source	Updated By	Updated Date
Permanent resident for 3 years and married to a U.S. citizen	INA 319(a), permanent resident for 3 years (married to USC for 3 years)	Declared at Submission	SALA, ROSA	02/09/2021

Names

Name	Type	Source	Updated By	Updated Date	Primary
PHILOSSAINT, JOFF STENN WROY	Legal Name	Declared at Submission	LOCKBOX	03/13/2020	Yes
PHILOSSAINT, JOFF STENN WROY	Permanent Resident Card	Updated by Internal User	MALCOLM, TRECIA	12/07/2020	No
PHILOSSAINT, JOFF STENN WROY	Permanent Resident Card	Declared at Submission	LOCKBOX	03/13/2020	No
PHILOSSAINT, JOFF STENN WROY	Alias	Updated by Internal User	MALCOLM, TRECIA	12/07/2020	No
PHILOSSAINT, JOFF STENN WROY	Alias	CLAIMS 3 Mainframe	ELIS INTERNAL	03/13/2020	No
PHILOSSAINT, JOFF STENN NMN	Alias	Central Index System	ELIS INTERNAL	03/13/2020	No
PHILOSSAINT, JOFF NMN	Alias	Central Index System	ELIS INTERNAL	03/13/2020	No

Request Legal Name Change

Name	Type	Source	Updated By	Updated Date
None	Legal Name	None	None	None

Social Security Number

SSN	Source	Updated By	Updated Date
██████-7416	Declared at Submission	LOCKBOX	03/13/2020

Date of Lawful Permanent Residency

Date of Lawful Permanent Residency	Source	Updated By	Updated Date
11/28/2016	Updated by Internal User	VANCOTT, WALKIRIA	12/15/2020

Account Number

097208602371

DOB

Date of Birth	Source	Updated By	Updated Date	Primary
■■■■/1990	Declared at Submission	LOCKBOX	03/13/2020	Yes

Medical Exemption Requested

Medical Exemption Requested	Source	Updated By	Updated Date
No	Declared at Submission	LOCKBOX	03/13/2020

Exception From English Requirement

Exception 50/20	Exception 55/15	Exception 65/20	Source	Updated By	Updated Date
No	No	No	Declared at Submission	LOCKBOX	03/13/2020

Accommodations

Deaf/Hard of Hearing	Updated By	Updated Date
Requested: No Requested Explanation: null	None	None
Blind/Low Vision	Updated By	Updated Date
Requested: No Requested Explanation: null	None	None
Other	Updated By	Updated Date
Requested: No Requested Explanation: null	None	None

Biographics

Height	Source	Updated By	Updated Date
6ft. 2in.	Updated by Internal User	VANCOTT, WALKIRIA	12/15/2020
6ft. 1in.	Declared at Submission	LOCKBOX	03/13/2020
Weight	Source	Updated By	Updated Date
195 pounds	Declared at Submission	LOCKBOX	03/13/2020

Ethnicity	Source	Updated By	Updated Date
Not Hispanic or Latino	Declared at Submission	LOCKBOX	03/13/2020
Race	Source	Updated By	Updated Date
Black or African American	Declared at Submission	LOCKBOX	03/13/2020
Eye Color	Source	Updated By	Updated Date
Brown	Declared at Submission	LOCKBOX	03/13/2020
Hair Color	Source	Updated By	Updated Date
Black	Declared at Submission	LOCKBOX	03/13/2020
Gender	Source	Updated By	Updated Date
Male	Declared at Submission	LOCKBOX	03/13/2020
Country of Birth	Source	Updated By	Updated Date
Haiti	Declared at Submission	LOCKBOX	03/13/2020
Country of Citizenship	Source	Updated By	Updated Date
Haiti	Declared at Submission	LOCKBOX	03/13/2020

Contacts

Phone Numbers

Phone Number	Type	Source	Updated By	Updated Date	Primary
(305) 680-6786	Daytime	Declared at Submission	LOCKBOX	03/13/2020	Yes
(305) 680-6786	Cell/Mobile SMS Phone	Declared at Submission	LOCKBOX	03/13/2020	Yes
(305) 680-6786	Work Phone	Declared at Submission	LOCKBOX	03/13/2020	Yes
(305) 680-6786	Evening Phone	Declared at Submission	LOCKBOX	03/13/2020	Yes

Email(s)

Email	Source	Updated By	Updated Date
JSWPHILOSSAINT@GMAIL.COM	Declared at Submission	LOCKBOX	03/13/2020

Residence History

Physical Address(es)

Address	Date Used	Source	Updated By	Updated Date	Primary
MIAMI, FL,	06/01/2017 - Present	Declared at Submission	LOCKBOX	03/13/2020	Yes
MIAMI, FL,	01/10/2016 - 06/01/2017	Declared at Submission	LOCKBOX	03/13/2020	No

Mailing Address(es)

Address	Date Used	Source	Updated By	Updated Date	Primary
██████████, MIAMI, FL, ██████████	Unknown - Present	Declared at Submission	LOCKBOX	03/13/2020	Yes

Employment/Schools

Organization Name	Address	Job Title	Begin Date	End Date	Source
Nouveau Riche Hair	1, WORKS FROM HOME -REMOTE-HQ TEXAS, FL, [REDACTED], USA	Help with shipping	06/01/2020	Present	Added by Internal User
ROYAL ELITE TRANS LLC	OVER THE ROAD, OVER THE ROAD, FL, [REDACTED], USA	Transportation/ car rental	10/01/2018	Present	Updated by Internal User
ROYAL ELITE TRANS LLC	OVER THE ROAD, OVER THE ROAD, FL, USA	OCCUPATION NOT REPORTED/UNKNO WN/INVALID	10/01/2018	Present	Declared at Submission
DANIA BCH CASINO	DANIA BCH, DANIA, FL, [REDACTED], USA	engineering	06/02/2016	10/20/2018	Updated by Internal User
DANIA BCH CASINO	DANIA BCH, DANIA, FL, USA	OCCUPATION NOT REPORTED/UNKNO WN/INVALID	06/02/2016	10/20/2018	Declared at Submission

Travel History

Trips outside US Past 5 years: Actual: 6 Declared: 6

Days outside US Past 5 years: Actual: 16 Declared: 32

Dates of Absence from U.S.:

Departure Date	Arrival Date	Countries Visited	Days outside of U.S.	Over Six Months	Source
10/09/2020	10/16/2020	Mexico; Mexico	6	No	Arrival and Departure Information System
08/15/2020	08/17/2020	Mexico; Unknown	1	No	Arrival and Departure Information System
04/05/2019	04/08/2019	HAITI	3	No	Declared at Submission
10/09/2018	10/16/2018	BRASIL	7	No	Declared at Submission
08/06/2018	08/06/2018	HAITI	1	No	Declared at Submission
10/26/2017	10/30/2017	HAITI	4	No	Declared at Submission
07/07/2017	07/10/2017	BAHAMAS CRUISE	3	No	Declared at Submission
06/16/2017	06/20/2017	DOMINICAN REPUBLIC	0	No	Declared at Submission

Relationships - Parents

Were your parents married before your 18th birthday?

Response	Source	Updated By	Updated Date
Yes	Declared at Submission	LOCKBOX	03/13/2020

Is your mother a U.S. Citizen?

Response	Source	Updated By	Updated Date
No	Declared at Submission	LOCKBOX	03/13/2020

Is your father a U.S. Citizen?

Response	Source	Updated By	Updated Date
No	Declared at Submission	LOCKBOX	03/13/2020

Relationships - Marital History

Times Married	Marriage Status	Source	Updated By	Updated Date
1	Married	Declared at Submission	VANCOTT, WALKIRIA	12/15/2020

Applicant's Spouse: MERTIL, FERLINDA NMN

Name(s)

Name	Type	Source	Updated By	Updated Date	Primary
MERTIL, FERLINDA NMN	Legal Name	Declared at Submission	LOCKBOX	03/13/2020	Yes

DOB

Date of Birth	Source	Updated By	Updated Date	Primary
1987	Declared at Submission	LOCKBOX	03/13/2020	Yes

Alien Number

Alien Number	Source	Updated By	Updated Date	Primary
None	None	None	None	None

Address(es)

Address	Type	Source	Updated By	Updated Date	Primary
MIAMI, FL,	Physical Address	Updated by Internal User	VANCOTT, WALKIRIA	12/15/2020	Yes

MIAMI, FL, [REDACTED]	Physical Address	Updated by Internal User	VANCOTT, WALKIRIA	12/15/2020	Yes
FL	Physical Address	Declared at Submission	LOCKBOX	03/13/2020	Yes

Employment

Employer	Source	Updated By	Updated Date
None	None	None	None

Country of Citizenship

U.S. Citizen?	Country of Citizenship	Date of U.S. Citizenship	Became a U.S. Citizen By	Source	Updated By	Updated Date
Yes	United States	None	Birth in the United States	Declared at Submission	LOCKBOX	03/13/2020

Additional Details

Times Married	Member of Armed Forces	Immigration Status	Immigration Status Explanation	Source	Updated By	Updated Date
1	No	None Provided	N/A	Declared at Submission	LOCKBOX, NFN NMN	03/13/2020

Relationship Details

Date of Marriage	Source	Updated By	Updated Date
02/04/2016	Declared at Submission	LOCKBOX	03/13/2020

Relationships - Children

Applicant's Child: P [REDACTED], J [REDACTED] D [REDACTED]

Name(s)

Name	Type	Source	Updated By	Updated Date	Primary
[REDACTED]	Legal Name	Declared at Submission	LOCKBOX	03/13/2020	Yes

DOB

Date of Birth	Source	Updated By	Updated Date	Primary
[REDACTED] 2017	Declared at Submission	LOCKBOX	03/13/2020	Yes

Alien Number

Address(es)

Address	Type	Source	Updated By	Updated Date	Primary
WITH HIM, MIAMI, Florida, [REDACTED], United States	Physical Address	Updated by Internal User	VANCOTT, WALKIRIA NMN	12/15/2020	Yes
MIAMI, Florida, United States	Physical Address	Declared at Submission	LOCKBOX, NFN NMN	03/13/2020	Yes

Country of Birth

Country of Birth	Source	Updated By	Updated Date
United States	Declared at Submission	LOCKBOX	03/13/2020

Additional Info

Relationship Explanation	Source	Updated By	Updated Date
BIOLOGICAL	Declared at Submission	LOCKBOX, NFN NMN	03/13/2020

Applicant's Child: P [REDACTED] G [REDACTED] S [REDACTED] W [REDACTED]

Name(s)

Name	Type	Source	Updated By	Updated Date	Primary
[REDACTED]	Legal Name	Declared at Submission	LOCKBOX	03/13/2020	Yes

DOB

Date of Birth	Source	Updated By	Updated Date	Primary
[REDACTED] 2016	Declared at Submission	LOCKBOX	03/13/2020	Yes

Alien Number

Address(es)

Address	Type	Source	Updated By	Updated Date	Primary
PORT AU PTINCE, PORT AU PRINCE, Haiti	Physical Address	Declared at Submission	LOCKBOX, NFN NMN	03/13/2020	Yes

Country of Birth

Country of Birth	Source	Updated By	Updated Date
Haiti	Declared at Submission	LOCKBOX	03/13/2020

Additional Info

Relationship Explanation	Source	Updated By	Updated Date
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BIOLOGICAL Declared at Submission LOCKBOX, NFN NMN 03/13/2020

Applicant's Child: P [REDACTED], J [REDACTED]

Name(s)

Name	Type	Source	Updated By	Updated Date	Primary
[REDACTED]	Legal Name	Added by Internal User	VANCOTT, WALKIRIA	12/15/2020	Yes

DOB

Date of Birth	Source	Updated By	Updated Date	Primary
[REDACTED] 2020	Added by Internal User	VANCOTT, WALKIRIA	12/15/2020	Yes

Alien Number

Address(es)

Address	Type	Source	Updated By	Updated Date	Primary
[REDACTED], MIAMI, Florida, [REDACTED], United States	Mailing Address	Updated by Internal User	VANCOTT, WALKIRIA NMN	12/15/2020	Yes
[REDACTED] MIAMI, Florida, [REDACTED] United States	Mailing Address	Added by Internal User	VANCOTT, WALKIRIA NMN	12/15/2020	Yes

Country of Birth

Country of Birth	Source	Updated By	Updated Date
N/A	Added by Internal User	VANCOTT, WALKIRIA	12/15/2020

Additional Info

Relationship Explanation	Source	Updated By	Updated Date
None	Added by Internal User	VANCOTT, WALKIRIA NMN	12/15/2020

Eligibility Questions

Eligibility Questions Transcript

1. Have you EVER claimed to be a U.S. citizen (in writing or any other way)?

Declared Response:

No

Declared Date:

03/13/2020

Question Asked During Interview:

Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

10A. Have you EVER been a member of, or in any way associated (directly or indirectly) with: The Communist Party?

Declared Response:

No

Declared Date:

03/13/2020

Question Asked During Interview:

Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

10B. Have you EVER been a member of, or in any way associated (directly or indirectly) with: Any other totalitarian party?

Declared Response:

No

Declared Date:

03/13/2020

Question Asked During Interview:

Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

10C. Have you EVER been a member of, or in any way associated (directly or indirectly) with: A terrorist organization?

Declared Response:

No

Declared Date:

03/13/2020

Question Asked During Interview:

Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

11. Have you EVER advocated (either directly or indirectly) the overthrow of any government by force or violence?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

12. Have you EVER persecuted (either directly or indirectly) any person because of race, religion, national origin, membership in a particular social group, or political opinion?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

13A. Between March 23, 1933 and May 8 ,1945, did you work for or associate in any way (either directly or indirectly) with: The Nazi government of Germany?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

13B. Between March 23, 1933 and May 8 ,1945, did you work for or associate in any way (either directly or indirectly) with: Any government in any area occupied by, allied with, or established with the help of the Nazi government of Germany?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

13C. Between March 23, 1933 and May 8 ,1945, did you work for or associate in any way (either directly or indirectly) with: Any German, Nazi, or S.S. military unit,

paramilitary unit, self-defense unit, vigilante unit, citizen unit, police unit, government agency or office, extermination camp, concentration camp, prisoner of war camp, prison, labor camp, or transit camp?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

14A. Were you EVER involved in any way with any of the following: Genocide?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

14B. Were you EVER involved in any way with any of the following: Torture?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

14C. Were you EVER involved in any way with any of the following: Killing, or trying to kill, someone?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

14D. Were you EVER involved in any way with any of the following: Badly hurting, or trying to hurt, a person on purpose?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

14E. Were you EVER involved in any way with any of the following: Forcing, or trying to force, someone to have any kind of sexual contact or relations?

<i>Declared Response:</i>	No
<i>Declared Date:</i>	03/13/2020
<i>Question Asked During Interview:</i>	Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

14F. Were you EVER involved in any way with any of the following: Not letting someone practice his or her religion?

Declared Response:	No
Declared Date:	03/13/2020
Question Asked During Interview:	Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

15A. Were you EVER a member of, or did you EVER serve in, help, or otherwise participate in, any of the following groups: Military unit?

Declared Response:	No
Declared Date:	03/13/2020
Question Asked During Interview:	Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

15B. Were you EVER a member of, or did you EVER serve in, help, or otherwise participate in, any of the following groups: Paramilitary unit? (a group of people who act like a military group but are not part of the official military)

Declared Response:	No
Declared Date:	03/13/2020
Question Asked During Interview:	Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

15C. Were you EVER a member of, or did you EVER serve in, help, or otherwise

participate in, any of the following groups: Police unit?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

15D. Were you EVER a member of, or did you EVER serve in, help, or otherwise participate in, any of the following groups: Self-defense unit?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

15E. Were you EVER a member of, or did you EVER serve in, help, or otherwise participate in, any of the following groups: Vigilante unit? (a group of people who act like the police, but are not part of the official police)

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

15F. Were you EVER a member of, or did you EVER serve in, help, or otherwise participate in, any of the following groups: Rebel group?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

15G. Were you EVER a member of, or did you EVER serve in, help, or otherwise participate in, any of the following groups: Guerilla group? (a group of people who use weapons against or otherwise physically attack the military, police, government, or other people)

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

15H. Were you EVER a member of, or did you EVER serve in, help, or otherwise participate in, any of the following groups: Militia? (an army of people, not part of the official military)

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

15I. Were you EVER a member of, or did you EVER serve in, help, or otherwise participate in, any of the following groups: Insurgent organization? (a group that uses weapons and fights against a government)

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

16A. Were you EVER a worker, volunteer, or soldier, or did you otherwise EVER serve in any of the following: Prison or jail?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

16B. Were you EVER a worker, volunteer, or soldier, or did you otherwise EVER serve in any of the following: Prison camp?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

16C. Were you EVER a worker, volunteer, or soldier, or did you otherwise EVER serve in any of the following: Detention facility? (a place where people are forced to stay)

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

16D. Were you EVER a worker, volunteer, or soldier, or did you otherwise EVER serve in any of the following: Labor camp? (a place where people are forced to work)

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

16E. Were you EVER a worker, volunteer, or soldier, or did you otherwise EVER serve in any of the following: Any other place where people were forced to stay?

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

17. Were you EVER a part of any group, or did you EVER help any group, unit, or organization that used a weapon against any person, or threatened to do so?

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

17A. If you answered "Yes," when you were part of this group, or when you helped this group, did you ever use a weapon against another person?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

17B. If you answered "Yes," when you were part of this group, or when you helped this group, did you ever tell another person that you would use a weapon against that person?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

18. Did you EVER sell, give, or provide weapons to any person, or help another person sell, give, or provide weapons to any person?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

18A. If you answered "Yes," did you know that this person was going to use the weapons against another person?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

18B. If you answered "Yes," did you know that this person was going to sell or give the weapons to someone who was going to use them against another person?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

19. Did you EVER receive any type of military, paramilitary (a group of people who act like a military group but are not part of the official military), or weapons training?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

2. Have you EVER registered to vote in any Federal, state, or local election in the United States?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

20. Did you EVER recruit (ask), enlist (sign up), conscript (require), or use any person under 15 years of age to serve in or help an armed force or group?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

21. Did you EVER use any person under 15 years of age to do anything that helped or supported people in combat?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

22. Have you EVER committed, assisted in committing, or attempted to commit, a crime or offense for which you were NOT arrested?

Declared Response: No
Declared Date: 03/13/2020

Question Asked During Interview:

Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

23. Have you EVER been arrested, cited, or detained by any law enforcement officer (including any immigration officials or any officials of the U.S. armed forces) for any reason?

Declared Response:

No

Declared Date:

03/13/2020

Question Asked During Interview:

Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

24. Have you EVER been charged with committing, attempting to commit, or assisting in committing a crime or offense?

Declared Response:

No

Declared Date:

03/13/2020

Question Asked During Interview:

Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

25. Have you EVER been convicted of a crime or offense?

Declared Response:

No

Declared Date:

03/13/2020

Question Asked During Interview:

Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

26. Have you EVER been placed in an alternative sentencing or a rehabilitative program (for example, diversion, deferred prosecution, withheld adjudication, deferred adjudication)?

Declared Response:

No

Declared Date:

03/13/2020

Question Asked During Interview:

Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

27A. Have you EVER received a suspended sentence, been placed on probation, or been paroled?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

27B. If you answered "Yes," have you completed the probation or parole?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

28A. Have you EVER been in jail or prison?

Declared Response: No
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

28B1. If you answered "Yes", how long were you in jail or prison? Years:

Declared Response: 0
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

28B2. If you answered "Yes", how long were you in jail or prison? Months:

Declared Response: 0
Declared Date: 03/13/2020
Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

28B3. If you answered "Yes", how long were you in jail or prison? Days:

Declared Response: 0
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

29. If you answered "Yes" to any question in Item Numbers 23 - 28, then complete this table.

Applicant Testimony	Response Date
None	None

3. Have you EVER voted in any Federal, state, or local election in the United States?

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

30A. Have you ever: Been a habitual drunkard?

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

30B. Have you ever: Been a prostitute, or procured anyone for prostitution?

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

30C. Have you ever: Sold or smuggled controlled substances, illegal drugs, or narcotics?

Declared Response: No

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

30D. Have you ever: Been married to more than one person at the same time?

Declared Response: No

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

30E. Have you ever: Married someone in order to obtain an immigration benefit?

Declared Response: No

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

30F. Have you ever: Helped anyone to enter, or try to enter, the United States illegally?

Declared Response: No

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

30G. Have you ever: Gambled illegally or received income from illegal gambling?

Declared Response: No

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

30H. Have you ever: Failed to support your dependents or to pay alimony?

Declared Response: No

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
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None	None	None
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30I. Have you ever: Made any misrepresentation to obtain any public benefit in the United States?

<i>Declared Response:</i>	No	
<i>Declared Date:</i>	03/13/2020	
<i>Question Asked During Interview:</i>	Yes	
Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

31. Have you EVER given any U.S. Government officials any information or documentation that was false, fraudulent, or misleading?

<i>Declared Response:</i>	No	
<i>Declared Date:</i>	03/13/2020	
<i>Question Asked During Interview:</i>	Yes	
Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

32. Have you EVER lied to any U.S. Government officials to gain entry or admission into the United States or to gain immigration benefits while in the United States?

<i>Declared Response:</i>	No	
<i>Declared Date:</i>	03/13/2020	
<i>Question Asked During Interview:</i>	Yes	
Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

33. Have you EVER been removed, excluded, or deported from the United States?

<i>Declared Response:</i>	No	
<i>Declared Date:</i>	03/13/2020	
<i>Question Asked During Interview:</i>	Yes	
Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

34. Have you EVER been ordered removed, excluded, or deported from the United States?

<i>Declared Response:</i>	No	
<i>Declared Date:</i>	03/13/2020	

Question Asked During Interview:	Yes	
Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

35. Have you EVER been placed in removal, exclusion, rescission, or deportation proceedings?

Declared Response:	No	
Declared Date:	03/13/2020	
Question Asked During Interview:	Yes	
Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

36. Are removal, exclusion, rescission, or deportation proceedings (including administratively closed proceedings) currently pending against you?

Declared Response:	No	
Declared Date:	03/13/2020	
Question Asked During Interview:	Yes	
Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

37. Have you EVER served in the U.S. armed forces?

Declared Response:	No	
Declared Date:	03/13/2020	
Question Asked During Interview:	Yes	
Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

38A. Are you currently a member of the U.S. armed forces?

Declared Response:	No	
Declared Date:	03/13/2020	
Question Asked During Interview:	Yes	
Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

38B. If you answered "Yes", are you scheduled to deploy overseas, including to a vessel, within the next three months? (Refer to the Address Change section in the Instructions on how to notify USCIS if you learn of your deployment plans after you file

your Form N-400.)

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

38C. If you answered "Yes", are you currently stationed overseas?

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

39. Have you EVER been court-martialed, administratively separated, or disciplined, or have you received an other than honorable discharge, while in the U.S. armed forces?

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

40. Have you EVER been discharged from training or service in the U.S. armed forces because you were an alien?

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

41. Have you EVER left the United States to avoid being drafted in the U.S. armed forces?

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
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None None None

42. Have you EVER applied for any kind of exemption from military service in the U.S. Armed Forces?

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

43. Have you EVER deserted from the U.S. armed forces?

Declared Response: No
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

44A. Are you a male who lived in the United States at any time between your 18th and 26th birthdays? (This does not include living in the United States as a lawful nonimmigrant.)

Declared Response: Yes
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

44B1. 44B1. If you answered "Yes", when did you register for Selective Service? Provide the information below.

Declared Response: 12/13/2016
 Declared Date: 03/13/2020
 Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

44B2. 44B2. If you answered "Yes", what is your Selective Service Number? Provide the information below.

Declared Response: 9024503188

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

45. Do you support the Constitution and form of Government of the United States?

Declared Response: Yes

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

46. Do you understand the full Oath of Allegiance to the United States?

Declared Response: Yes

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

47. Are you willing to take the full Oath of Allegiance to the United States?

Declared Response: Yes

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

48. If the law requires it, are you willing to bear arms on behalf of the United States?

Declared Response: Yes

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview

Applicant testimony

Response Date

None

None

None

49. If the law requires it, are you willing to perform noncombatant services in the U.S. armed forces?

Declared Response: Yes

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

4A. Do you now have, or did you EVER have, a hereditary title or an order of nobility in any foreign country?

<i>Declared Response:</i>	No
<i>Declared Date:</i>	03/13/2020
<i>Question Asked During Interview:</i>	Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

4B. If you answered "Yes," at your naturalization ceremony, are you willing to give up any inherited titles or orders of nobility that you have in a foreign country?

Declared Response:	No
Declared Date:	03/13/2020
Question Asked During Interview:	Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

5. Have you EVER been declared legally incompetent or been confined to a mental institution?

Declared Response:	No
Declared Date:	03/13/2020
Question Asked During Interview:	Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

50. If the law requires it, are you willing to perform work of national importance under civilian direction?

<i>Declared Response:</i>	Yes
<i>Declared Date:</i>	03/13/2020
<i>Question Asked During Interview:</i>	Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

6. Do you owe any overdue Federal, state, or local taxes?

Declared Response: No

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

7A. Have you EVER not filed a Federal, state, or local tax return since you became a lawful permanent resident?

Declared Response: No

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

7B. If you answered "Yes," did you consider yourself to be a "non-U.S. resident"?

Declared Response: No

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

8. Have you called yourself a "non-U.S. resident" on a Federal, state, or local tax return since you became a lawful permanent resident?

Declared Response: No

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

9A. Have you EVER been a member of, involved in, or in any way associated with, any organization, association, fund, foundation, party, club, society, or similar group in the United States or in any other location in the world?

Declared Response: No

Declared Date: 03/13/2020

Question Asked During Interview: Yes

Applicant Response(s) at Interview	Applicant testimony	Response Date
None	None	None

9B. If you answered "Yes", provide the information below.

Applicant Testimony	Response Date
None	None

Applicant Testimony

No testimonies found on file.

Officer Comments

Comment	Updated By	Updated Date
The applicant presented Western Union receipts regarding child support for his child in Haiti.	VANCOTT, WALKIRIA NMN	12/15/2020 17:18:57 UTC
Has 2 children with his wife. Has a third child in Haiti.	VANCOTT, WALKIRIA NMN	12/15/2020 13:46:56 UTC

Statements and Signatures

Applicant's Statement, Certification, and Signature

Can Read English	Yes
Interpreter Read all Questions	No
Language Interpreted In	BLANK
Requested Services of Preparer	Yes
Preparer Name	ALEX TELFORT
Preparer is Attorney or Accredited Rep	No
Date of Signature	02/24/2020

Interpreter

There is no Interpreter associated with this case.

Interpreter

Name	Source
TELFORT, ALEX	Declared at Submission
Organization Name	Source
YOUR IMMIGRATION S	Declared at Submission
Mailing Address	Source
██████████, MIAMI, FL ██████ USA	Declared at Submission
Daytime Phone	Source
██████████ 5421	Declared at Submission
Email	Source
N██████████.COM	Declared at Submission
Language	Source
No Data Declared	Declared at Submission

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Form N-649 (Rev. 2011)

Attestation of Changes

Review of Changes and Signature at Interview

Biographic Information

Height

NEW RESPONSE:

Feet: Inches:

ORIGINAL RESPONSE:

Feet: Inches:

Information About Your Employment and Schools You Attended

Nouveau Riche Hair

Employer or School Name

NEW RESPONSE:

Nouveau Riche Hair

ORIGINAL RESPONSE:

A-Number: A208075457 | Receipt Number: IOE0908647692

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Nouveau Riche Hair

Address

NEW RESPONSE:

1
WORKS FROM HOME -REMOTE- HQ TEXAS, FL, 33169
USA

ORIGINAL RESPONSE:

Nouveau Riche Hair

Date From

NEW RESPONSE:

Date: 06/01/2020

ORIGINAL RESPONSE:

Date:

Nouveau Riche Hair

Date To

NEW RESPONSE:

Date:

ORIGINAL RESPONSE:

Date:

A-Number: A208075457 | Receipt Number: IOE0908647692

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Nouveau Riche Hair

Your Occupation

NEW RESPONSE:

Help with shipping

ORIGINAL RESPONSE:

ROYAL ELITE TRANS LLC

Address

NEW RESPONSE:

OVER THE ROAD
OVER THE ROAD, FL, 33169
USA

ORIGINAL RESPONSE:

~~OVER THE ROAD~~
~~OVER THE ROAD, FL~~
~~USA~~

ROYAL ELITE TRANS LLC

Your Occupation

NEW RESPONSE:

A-Number: A208075457 | Receipt Number: IOE0908647692

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Transportation/ car rental

ORIGINAL RESPONSE:

~~OCCUPATION NOT REPORTED/UNKNOWN/INVALID~~

DANIA BCH CASINO

Address

NEW RESPONSE:

DANIA BCH
DANIA, FL, 33169
USA

ORIGINAL RESPONSE:

~~DANIA BCH~~
~~DANIA, FL~~
~~USA~~

DANIA BCH CASINO

Your Occupation

NEW RESPONSE:

engineering

ORIGINAL RESPONSE:

~~OCCUPATION NOT REPORTED/UNKNOWN/INVALID~~

A-Number: A208075457 | Receipt Number: IOE0908647692

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Information About Your Marital History

If you are married now, provide the following information about your current spouse.

G. Current Spouse's Address

NEW RESPONSE:

[REDACTED]

MIAMI, FL, [REDACTED]
USA

From Date: Unknown

To Date: —

ORIGINAL RESPONSE:

~~FL~~

~~USA~~

~~From Date: 03/13/2020~~

~~To Date: —~~

Information About Your Children

No of Children

NEW RESPONSE:

3

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ORIGINAL RESPONSE:

~~2~~

Information about child - PHILOSSAINT, JERIMIAH NMN

Name

NEW RESPONSE:

P

Family Name (Last Name)

Middle Name (If Applicable)

ORIGINAL RESPONSE:

Family Name (Last Name)

Given Name (First Name)

Middle Name (If Applicable)

Information about child - P, NMN

Date of Birth

NEW RESPONSE:

Date: 2020

ORIGINAL RESPONSE:

Date:

Information about child - PHILOSSAINT, JERIMIAH NMN

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Current Address

NEW RESPONSE:

MIAMI, FL,
USA

From Date: Unknown

To Date: —

ORIGINAL RESPONSE:

Information about child – P

Relationship Explanation

NEW RESPONSE:

ORIGINAL RESPONSE:

Information about child – P

Current Address

NEW RESPONSE:

WITH HIM
MIAMI, FL,
USA

From Date: Unknown

A-Number: A208075457 | Receipt Number: IOE0908647692

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To Date: —

ORIGINAL RESPONSE:

~~MIAMI, DADE, FL~~

~~USA~~

~~From Date: 03/13/2020~~

~~To Date: —~~

N-400 Attestation

I swear (*affirm*) and certify under penalty of perjury under the laws of the United States of America that I know that the contents of this Form N-400, Application for Naturalization, subscribed by me, including the corrections displayed above, are complete, true, and correct. The evidence submitted by me on numbered pages 1 through 0, are complete, true, and correct.

Interview Signature

Applicant's Signature



Tuesday December 15, 2020 08:48 AM (EST)

Applicant

A-Number: A208075457 | Receipt Number: IOE0908647692

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Oath of Allegiance

Oath of Allegiance

If your application is approved, you will be scheduled for a public oath ceremony at which time you will be required to take the following **Oath of Allegiance** immediately prior to becoming a naturalized citizen. By signing below you acknowledge your willingness and ability to take this oath:

I hereby declare on oath, that I absolutely and entirely renounce and abjure all allegiance and fidelity to any foreign prince, potentate, state, or sovereignty, of whom or which I have heretofore been a subject or citizen;

I hereby declare on oath, that I absolutely and entirely renounce and abjure all allegiance and fidelity to any foreign prince, potentate, state, or sovereignty, of whom or which I have heretofore been a subject or citizen;

that I will support and defend the Constitution and laws of the United States of America against all enemies, foreign, and domestic;

that I will bear true faith and allegiance to the same;

that I will bear arms on behalf of the United States when required by the law;

that I will perform noncombatant service in the U.S. armed forces of the United States when required by the law;

that I will perform work of national importance under civilian direction when required by the law; and

that I take this obligation freely, without any mental reservation or purpose of evasion; so help me God.

PHILOSSAINT

Family Name (Last Name)

JOFF STENN

Given Name (First Name)

WROY

Middle Name (If Applicable)

A-Number: A208075457 | Receipt Number: IOE0908647692

Page 1 of 2




Tuesday December 15, 2020 08:49 AM (EST)
Applicant

A-Number: A208075457 | Receipt Number: IOE0908647692

Page 2 of 2

Oath of Allegiance

 Oath of Allegiance and Order Granting Request for Name Change			
Department of Homeland Security U.S. Citizenship and Immigration Services		USCIS Form-N647 Internal Form	
Date (mm/dd/yyyy)		02/09/2021	
List No.		February 2021	
This is Page		1 of 2	
UNITED STATES DISTRICT COURT DISTRICT OF			
IN RE: NATURALIZATION CEREMONY			
PRESENTATION OF CANDIDATES FOR NATURALIZATION AND NAME CHANGE REQUESTS			
To the Honorable <u>15</u> Sitting At: _____			
<p>The individuals listed below have filed applications for naturalization with U.S. Citizenship and Immigration Services (USCIS). USCIS has determined that they are eligible for naturalization and has approved their naturalization applications. Pursuant to section 310(b) of the Immigration and Nationality Act, the Court is authorized to administer the Oath of Allegiance, and upon completion of the administration of the oath, to present each candidate with the Certificate of Naturalization.</p> <p>Additionally, some candidates have also requested a name change. The requested name change is designated by an * in the 'Name of Applicant' column beneath the applicant's legal name. Accordingly, USCIS is also presenting those requests for name change to the Court for appropriate action.</p>			
No.	Alien Registration No.	Name (*Including Name Change Requested)	Certificate No.
1			
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3			
4			
5			
6			
7			
8	-457	PHILOSSAINT, JOFF STENN WROY	202

N-647 03/20/17 Y Page 1 of 2

Date (mm/dd/yyyy) <u>02/09/2021</u>		
List No. _____		
This is Page <u>2</u> of <u>2</u>		
CONTINUATION SHEET		
In the <u>US District</u> Court of _____ at _____		
9		
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Respectfully Submitted:		
Signature of Officer Certifying Eligibility		
In the <u>US District</u> Court of _____ at _____		
Each of the candidates listed on List No. _____, sheet(s) <u>1</u> to <u>2</u> dated <u>02/09/2021</u> except for those whose names have been struck from the list, appeared in person in open Court at an oath administration ceremony held on <u>February 9, 2021 10:30 AM</u> , and having taken the oath of allegiance as prescribed in Section 337 of the Immigration and Nationality Act, was issued the Certificate of Naturalization. The names of those candidates who did not appear and take the oath have been struck from the list and the respective certificates of naturalization returned to USCIS.		
Signature of the Clerk of Court		Date (mm/dd/yyyy)
In conjunction with the administration of the Oath of Allegiance, the requests for name change are hereby granted and it is so ordered.		
Signature of the Judge		Date (mm/dd/yyyy)
N-647 03/20/17 Y		Page 2 of 2

NQP Worksheet

Interview Results

Interview Type: Initial
Interview Date: 12/15/2020
Interview Conducted By: VANCOTT, WALKIRIA
Interview Conducted Virtually: No

Appeared/No Show	PRC Status	CIV Status	312 Requirements	Age/Residency Exceptions	Test Results
Appeared	Seen and Returned	Completed	Met	N/A	All Tests Passed

Officer

A-file reviewed by an officer? Yes
Met time as permanent resident 316a / 319a only: Yes
Met section 318, complied with terms of admission as permanent resident: Yes
No section 318 issues apparent based on A-file review: No
Met section 318 at the time of interview: No
Established physical presence/continuous residence/service jurisdiction: Yes
Established good moral character (GMC): Yes
Established attachment to Constitution (Modified oath or oath waiver): Yes
Last Updated By VANCOTT, WALKIRIA
Last Updated Date 12/15/2020

FBI Name Check

This section contains sensitive data and has been withheld from this Certified True Copy.

FBI Fingerprint Check

This section contains sensitive data and has been withheld from this Certified True Copy.

Military Checks

Completed	Source	Assignee	Status	Updated Date
Yes	ELIS	N/A	N/A	None

Manual Requests RAILS Requests

Initial Search Request Made?	Source	Updated Date
Yes	ELIS	03/13/2020
Manual Search Request Initiated	User	Updated Date
Not Initiated	N/A	None
Final Status Of A-File	User	Updated Date
A-File Received	VANCOTT, WALKIRIA	02/04/2021

A-file Processing

A-File Relates To Applicant?	Viewed In EDMS?	User	Updated Date
Yes	Not Viewed	VANCOTT, WALKIRIA	02/04/2021

T-file Processing

CIS Documentation Reviewed?	File Location	User	Updated Date
N/A	N/A	N/A	None

Render Case Decision

Case Decision: Approved

Decision Date:	02/04/2021
Oath Type:	N400 Oath Ceremony Administrative
Supervisory Review Requested?	No

Decision Notes

No notes found for this decision.

N-652



Naturalization Interview Results

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form N-652

A-Number ► A- 208075457

On 12/15/2020, you were interviewed by USCIS officer VANCOTT, W.

- ☒ You passed the English test and the U.S. history and government test.
- ☐ You passed the U.S. history and government test and you are exempt from the English language requirement.
- ☐ USCIS granted your request for a disability exception. The requirement to demonstrate English language ability and/or knowledge of U.S. history and government is waived.
- ☐ You will have another opportunity to be tested on your ability to ☐ speak ☐ read ☐ write ☐ understand English.
- ☐ You will have another opportunity to be tested on your knowledge of U.S. history and government.
- ☐ You did not pass the second and final test of your ☐ English ability ☐ knowledge of U.S. history and government. USCIS will not reschedule you for another interview for your Form N-400. USCIS will send you a written decision about your application.
- ☒ Follow the instructions on Form N-14, Request for Additional Information, Documents, or Forms.
- ☐ USCIS will send you a written decision about your application.

A) ☐ **Congratulations! Your application has been recommended for approval.** At this time, it appears that you have established your eligibility for naturalization. If final approval is granted, you will be notified of when and where to report for your naturalization ceremony.

B) ☒ **A decision cannot be made yet about your application.**

It is very important that you:

1. Notify USCIS if you change your address.
2. Attend any scheduled interview.
3. Submit all requested documents.
4. Send any questions about your application in writing to the officer named above. Include your full legal name, Alien Registration Number (A-Number), and a copy of your Form N-652.
5. Attend your scheduled Oath Ceremony. Dress in proper attire to respect the dignity of this event (for example, do not wear jeans, shorts or flip flops).
6. Notify USCIS as soon as possible in writing if you cannot attend your scheduled interview or Oath Ceremony. Include a copy of the scheduling notice.

NOTE: Be advised that under section 336 of the Immigration and Nationality Act (INA), you have the right to request a hearing before an immigration officer if your application is denied, or before the U.S. district court if USCIS has not made a determination on your application within 120 days of the date of your examination.

Form N-652 03/12/15 N

Page 1 of 1

Sworn Statements

No Sworn Statement or Police Clearance Statement provided.



Associated Cases

Related Cases

No related case data is available.



Case Comments

Case Comments

No case comments found on file.



Supporting Evidence

Naturalization Certificate

Certificate Serial Number	Certificate Status	Ceremony Date	Ceremony Location	Date Printed	Date Voided	PRC
202	Issued	02/09/2021	HIALEAH FIELD OFFICE	02/05/2021	None	Yes

Naturalization Certificate

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RFE Response

December 15, 2020

U.S. Department of Homeland Security
U.S. Citizenship and Immigration Services
5880 NW 183rd Street
Hialeah, FL 33015

U.S. Citizenship and Immigration Services

JOFF STENN WLOY PHILOSSAINT
[REDACTED]
MIAMI, FL [REDACTED]

RE: N-400, Application for Naturalization

IOE0908647692

A208-075-457

NOTICE OF CONTINUANCE

Dear JOFF STENN PHILOSSAINT

Examination of your N-400 application shows that additional information, documents or forms are needed before your application can be acted upon. **Please see attached and respond by January 19, 2021.**

Failure to do so may result in the denial of your application.

Submission of this information, however, does not guarantee that this case will be approved. We strongly recommend that you submit all the requested information, documents, or forms as listed on the following pages at one time and as soon as possible so that we can resume processing. Any interim benefits that may otherwise stem from the filing of this application or petition will be delayed while this case is in suspense awaiting your response.

If you choose to submit only some or none of the requested information, then the application will be adjudicated on its merits. You may also request, in writing, to the Service that this application be withdrawn. If the District Director consents to the withdrawal, the application will be denied without further notice to you and without prejudice to any future application. If the District Director does not consent to the withdrawal, then the application shall be adjudicated on its merits.

You must either mail all the requested information to the address shown below or scan and upload your response using your USCIS online account (if applicable) by January 19, 2021.

Sincerely,

E. S. Stulz
Enid S. Stulz
Director

ww

Attachment

Please include a copy of this letter and send your response by mail to this address:

**U.S. Citizenship and Immigration Services
Hialeah Field Office
5880 NW 183rd Street
Hialeah, FL 33015**

If you have dependent children who do not live with you, submit the following:

- Evidence that you support each dependent child from 3/10/2017- present ;
- Copies of any court or government order to provide financial support to your biological, step, or adoptive child(ren); and
- If there is a court or government order, evidence that you have complied with the court or government order, such as cancelled checks, money order receipts, and/or a court or agency printout of child support payments or evidence of wage garnishments.
- See the attached instructions.

cc:



IOE0908647692



A208-075-457



LAND SECUR

Instructions Concerning Child Support and Guidelines for Evidence of Child Support Documentation

The United States Citizenship and Immigration Services, Hialeah Field Office, has provided guidelines as to the types of documentation which you may submit to establish that you have supported your dependents (children) during your naturalization statutory period. Please read these instructions carefully. You may present these instructions to the appropriate agency or court to assist you.

If you have dependent children living apart from you (all children under the age of 18) during the statutory period **03/10/2017 to PRESENT**, present evidence that you support each dependent child and that you have complied with child support obligations.

Such evidence may include:

- (1) Birth certificates for all children you claim, or a court order naming you as the parent; or
- (2) Final adoption certificates or decrees for all children you have legally adopted.
- (3) Court or government order for child support; or
- (4) If you are divorced from the child's other parent, provide a copy of the divorce decree along with the marital settlement agreement or any judicial proceeding concerning the matter of child support.

Bring photocopies of the court or government order and evidence you have complied with the order if a court has ordered you to provide financial support for a spouse, ex-spouse, or children. Such evidence may include:

- (1) Canceled checks or money order receipts;
- (2) A court or agency document showing child support payments;
- (3) Evidence of wage garnishments; or
- (4) A notarized letter from the parent or guardian who cares for your children.

In the absence of the existence of a court order for child support, you may submit a notarized statement from the child's custodial parent or guardian. The statement may include the following information:

1. Her/his home address and telephone number;
2. Verification of the amount, frequency, form and method of provision of child support with the dates the child support began and ended; and,
3. A copy of a form of picture identification for the parent or guardian such as driver license, government or employment ID.

SUBMIT A CERTIFIED ENGLISH TRANSLATION OF ALL FOREIGN LANGUAGE DOCUMENTS.

FHA Rev 2/2018

To whom it may concern

I undersigned, **Dapheka Desmaret**, identify to Nos. 002-754-695-6 and 01-01-99-1995-06-00-295, owner, living and domicile in Port au Prince; mother of [REDACTED] stipule that **Joff Wroy Stenn Philossaint**, identified by his passport to no.: [REDACTED] 94 has been taking care of his son who is living with me in Haiti and currently pays his school tuitions.

Therefore, this affidavit can be used to what it is entitled to.

Done in Port Au Prince, on January 12, 2021

Signature of Dapheka Desmaret

Considering for the material certification of the signature of Dapheka Desmaret appeared above.

Port au Prince, January 12, 2021

Signature of Jean Frantz Ceant, Notary Public

Certificate of Translator's Competence

I, Nathan Present, certify that I am competent to translate this document and that the translation is true and accurate to the best of my abilities.


Signature

[REDACTED] 6447

01/15/2021

Date



A QUI DE DROIT

Je soussignée,

Dapheka DESMARET, identifiée aux Nos : 002-754-695-6 et 01-01-99-1995-06-00-295, propriétaire, demeurant et domiciliée à Port-au-Prince ; mère de [REDACTED] stipule que Joff Stenn Wroy PHILOSSAINT, identifié par son passeport au No : [REDACTED] 94, prend bien soin de son fils qui vit en Haïti et paie normalement ses frais de scolarité.-

Par conséquent ce papier peut être utilisé pour valoir ce que de droit

Fait à Port-au-Prince, le douze Janvier deux mille vingt et un (12-01- 2021).-

Dapheka Desmaret
Dapheka DESMARET

VU : UNIQUEMENT POUR LA CERTIFICATION MATERNELLE DE LA SIGNATURE DE :
DAPHEKA DESMARET APOSEE CI-DESSUS.-

PORT-AU-PRINCE, LE DOUZE JANVIER DEUX MILLE VINGT ET UN (12-01-2021).-

[Signature]
Me JEAN JOSEPH FRANTZ CEANT
NOTAIRE PUBLIC.-





SOGEXPRESS

ATTENTION

The General society of Transfers S.A (Sogexpress) certify by this present that Mrs. **Dapheka Desmaret**, identifies by her national identification number: 002-754-695-6 have received some transfers totaling to \$1,270.00 in many of our stores during the period of January to December 2019 from **Joff Wroy Stenn Philossaint**,

This attestation has delivered to serve and worth to what it is entitled to.

Done at Delmas, January 11, 2021

Jemima JC Ridore, person in charge

Sully F. Nixon Charles

Internal Director of Control

Stamp and signature

Certificate of Translator's Competence

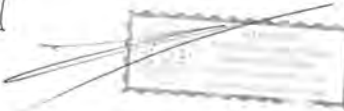
I, NATHAN PRESENT, certify that I am competent to translate this document and that the translation is true and accurate to the best of my abilities.

Signature



01/15/2021

Date



LAND SECURITY

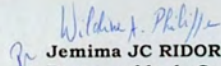


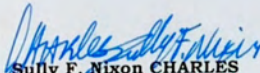
ATTESTATION

La **Société Générale de Transfert S.A (SOGEXPRESS)** certifie par la présente que **Madame Dapheka DESMARET**, identifiée par son numéro d'identification nationale : 002-754-695-6, a reçu des transferts totalisant **Mille deux cent soixante-dix dollars (1,270.00)** dans plusieurs de nos cabines, durant la période de Janvier à Décembre 2019, de la part de **Joff Wroy Stenn PHILOSSAINT**.

Cette attestation lui est délivrée pour servir et valoir ce que de droit.

Fait à Delmas, le 11 Janvier 2021.


Jemima JC RIDORE
Responsable de Conformité – Surveillance AML


Sully F. Nixon CHARLES
Directeur Contrôle Interne et Conformité



P.j. : Relevé des Transferts

1, Delmas 30, Delmas, Port-au-Prince, Haïti / Tél.: (509) 2229-5200 / 2815-5200
E-mail: contact@sogexpresshaiti.com / info@sogexpresshaiti.com

Transfer Amount/
Unidad de Ener

WESTERN UNION	
RECEIPT/RECIBO Thank you/Gracias	
TRACKING NUMBER (MTCN)/ NO. DE CONTROL DEL ENVIO 761-677-5075	
For Customer Service, please call 1-800-256-0004 for assistance, and visit our website at www.wu.com for more information.	
By: [Redacted] 05/11/2018	
Total Control Number/Total Control	
MAY 11 2018 02:04 PM EDT	
Money Transfer/Transfer de Dinero CASH/Diviso en efectivo	
Date of Transaction/Fecha de Transacción May 11, 2018/Mayo 11, 2018	
Time of Transaction/Hora de la Transacción 02:04 PM EDT	
Sender/Remitente [Redacted]	
Receiver/Asignatario DAHLIA DE SMARTE	
Expected Payout/Localidad Localidad donde Esperar Pago: Haiti/Kati	
Service Type/Tipo de Servicio MONEY TRANSFER (CASH/Diviso en efectivo)	
Date Available to Receive/Se puede retirar Disponible en el País del Destinatario May 16, 2018/Mayo 16, 2018	
Transfer Amount/ Cantidad de Dinero	
Transfer Fees/ Comisiones	

WESTERN UNION	
RECEIPT/RECIBO Thank you! Gracias	RECEIPT/RECIBO Thank you! Gracias
TRACKING NUMBER (MTCN)/ NO. DE CONTROL DEL ENVIO 776 419-9782	TRACKING NUMBER (MTCN)/ NO. DE CONTROL DEL ENVIO 300-329-2163
For a delivery Service, please call 1-800-325-6000. Para servicio de entrega llame al 1-800-325-6000.	For a delivery Service, please call 1-800-325-6000. Para servicio de entrega llame al 1-800-325-6000.
Check # 4401 400.44 6901 549 415.1 51.11	Check # 4401 400.44 6901 549 415.1 51.11
Money transferred from A/C Sender - ASH Banco en efectivo	Money transferred from A/C Sender - ASH Banco en efectivo
Date of transfer from Sender's bank April 25, 2016 / 25 de Abril, 2016	Date of transfer from Sender's bank April 25, 2016 / 25 de Abril, 2016
Date of transfer from Sender's bank April 25, 2016 / 25 de Abril, 2016	Date of transfer from Sender's bank April 25, 2016 / 25 de Abril, 2016
Sender/Remittente [REDACTED]	Sender/Remittente [REDACTED]
Receiver/Recipient [REDACTED]	Receiver/Recipient [REDACTED]
Expected Payout Location Los Angeles, California / Los Angeles, California	Expected Payout Location Los Angeles, California / Los Angeles, California
Unit of Measure USD / Dólar	Unit of Measure USD / Dólar
Transfer Amount \$400.44	Transfer Amount \$400.44
Unit of Measure USD / Dólar	Unit of Measure USD / Dólar

WESTERN UNION	
RECEIPT/RECIBO Thank you/Gracias	
TRACKING NUMBER (MTCN)/ NO. DE CONTROL DEL ENVIO 761-677-5075	
For Credit card service please call 1-800-525-6000. Para servicio de tarjeta de crédito llame al 1-800-525-6000.	
May 11, 2017 Mayo 11, 2017	
WIRE DATE 05/11/17	
Money Transfer/Envío de Dinero CASH Dinero en efectivo	
Sender/Remitente [REDACTED]	
Receiver/Receptor DAVID KALDESMARKE I	
Expected Payout Location/ Localidad donde Esperar Pago Haiti/Haití	
Service Type/Tipo de Servicio MONEY TRANSFER/TRANSFERENCIA DE DINERO	
Date Available in Receiver's Country/fecha Disponible en el País del Destinatario May 11, 2017/Mayo 11, 2017	
Transfer Amount/ Cantidad de Envío	51.50 USD
Transfer Fees/ Comisión	4.50 USD

WESTERN UNION	
RECEIPT/RECIBO Thank you/Gracias	
TRACKING NUMBER (MTCN)/ NO. DE CONTROL DEL ENVIO 721-610-6192	
For Credit card service please call 1-800-525-6000. Para servicio de tarjeta de crédito llame al 1-800-525-6000.	
May 10, 2017 Mayo 10, 2017	
WIRE DATE 05/10/17	
Money Transfer/Envío de Dinero CASH Dinero en efectivo	
Sender/Remitente [REDACTED]	
Receiver/Receptor DAVID KALDESMARKE I	
Expected Payout Location/ Localidad donde Esperar Pago Haiti/Haití	
Service Type/Tipo de Servicio MONEY TRANSFER/TRANSFERENCIA DE DINERO	
Date Available in Receiver's Country/fecha Disponible en el País del Destinatario May 10, 2017/Mayo 10, 2017	
Transfer Amount/ Cantidad de Envío	51.50 USD
Transfer Fees/ Comisión	4.50 USD

WESTERN UNION

RECEIPT/RECIBO
Thank you/Gracias

**TRACKING NUMBER (MTCN)/
NO. DE CONTROL DEL ENVIO:**
313-851-9931

For Customer Service, please call 1-800-325-
2222 or visit our website: www.westernunion.com
For more information, visit: www.westernunion.com

My Western Union Transaction:
Total Transmitted: \$100.00

Transmit to:
313-851-9931 - AIRMAIL FAX

Money Transmitted via Western Union:
CASH/TRANSFERED

Special Service (if any): (none)

Date of Transaction (if not the day of receipt):
December 31, 2022 (none)

Date of Transaction (if not the day of receipt):
11:30 AM EST

Service (if any):
[REDACTED]

Time of Transaction (if any):
[REDACTED]

Amount Transmitted (if any):
\$100.00

Expected receipt (if any): (none)

Service (if any): (none)

Date of receipt (if any): (none)

Transfer Amount:
Controlled by: [REDACTED]

For more information, visit: www.westernunion.com



We have also sent a receipt to
JSWPHILOSSAINT@GMAIL.COM

When picking up cash, your Final Receiver will need

- Government-issued photo ID
- Tracking number

Share the tracking number (MTCN) with DAPHEKA

875-211-2541



Total My WU points

 **0094**

Transfer details

Date of transactions

01/12/2021

Sender

Joff Philossaint

WesternUnion WU

15/01/2021 | 11:33 AM

Transfer details



04/16/2018

Dapheka Desmaret

Complete

130.00 USD

Tracking No. (MTCN): 176 129 6168

Sender details

Joff Wroy Stenn Philossaint
Master card ending in 4455

Payout location

Haiti

Delivery time

In minutes

Receiver details

Dapheka Desmaret
Undefined, Haiti
Delivery method: Cash at agent

Summary

Transfer amount	130.00 USD
Transfer fee	+ 15.00 USD
Transfer total	145.00 USD
Transfer amount	130.00 USD
Haiti Central Bank Fee	- 1.50 USD
Total to Receiver	130.00 USD

WesternUnion WU

15/01/2021 | 11:33 AM

Transfer details



12/13/2018

Dapheka Desmaret

Complete

41.50 USD

Tracking No. (MTCN): 008 097 1190

Sender details

Joff Wroy Stenn Philossaint
Visa card ending in 1184

Receiver details

Dapheka Desmaret
Undefined, Haiti
Delivery method: Cash at agent

Payout location

Haiti

Summary

Transfer amount	41.50 USD
Transfer fee	+ 4.99 USD
Transfer total	46.49 USD
Transfer amount	41.50 USD
Haiti Central Bank Fee	- 1.50 USD
Total to Receiver	40.00 USD

Delivery time

In minutes

LAND SECUR

WesternUnion WU

15/01/2021 | 11:33 AM

Transfer details

07/12/2019

DD

Dapheka Desmaret

Complete

50.00 USD

Tracking No. (MTCN): 863 696 7190

Sender details

Joff Philossaint

Visa card ending in 9187

Receiver details

Dapheka Desmaret

Undefined, Haiti

Delivery method: Cash at agent

Payout location

Haiti

Delivery time

In minutes

Summary

Transfer amount	50.00 USD
Transfer fee	+ 4.99 USD
Transfer total	54.99 USD
Transfer amount	50.00 USD
Haiti Central Bank Fee	- 1.50 USD
Total to Receiver	48.50 USD

Additional Fees/
Cargos Adicionales:

+

0.00 USD

12:03 5G

Please visit an agent location with 80.50 USD in cash and your photo ID by 12/16/2020 00:02:41 tomorrow to complete your transfer. You'll need to tell the agent you started the transfer online and provide them with your mobile phone number: 3056806786.

To find an agent location, select **Pay for a money transfer** under **Start online, finish in store**.

To make any changes to this transfer, you'll need to call us on 1-877-989-3268. For any changes made at the agent location, we'll update the transfer fee and foreign exchange rate accordingly.

Thank you for choosing Western Union.

Sender	Final Receiver
Name: JOFF PHILOSSAINT	Name: DAPHEKA DESMARET
Address:	Address:
State: FL	State:
Zip code:	Zip code:
Country : US	Country: Haiti
Phone number: 3056806786	Phone number: 50940652782
Payment Information:	Payout Information:
Pay in cash at any participating WU agent location.	Delivery ¹ :Cash pick-up ⁶
	Expected Payout Location:
	State:
	Country: Haiti
Billing Summary	Transfer Summary:
Transfer Amount: 73.00	Transfer amount: 4910.56

Transfer Amount/
Auszahlungsbetrag EUR 1.000,00 USD

Abstract The authors examined the effects of a 6-week training program on the self-reported health status of older adults. The study was conducted in two phases. In phase I, 70 participants completed a baseline survey. In phase II, 48 participants completed a follow-up survey after completing the training program. The results showed that the training program had a positive effect on the self-reported health status of older adults.

WESTERN UNION

RECEIPT/RECIBO
Thank you/Gracias

TRACKING NUMBER (MTCN)/
NO. DE CONTROL DEL ENVIO.
245-303-8090

For Customer Service, please call 1-800-325-6000/Para comunicarse con el servicio de atención al cliente, llame al 1-800-325-6000

My WUE #562179/70
Total Points/Puntos totales 84

PUBLIX #1090
5715 NW 7TH ST. AIRPARK PLAZA, FL

Money Transfer/Envío de Dinero
CASH/Dinero en efectivo

Operator ID/No. ID del Operador 417

Date of Transactions/Fecha de las Transacciones
December 20, 2020/Diciembre 20, 2020
Time of Transactions/Hora de las Transacciones
02:50 PM EST
Sender/Remitente
JOFF P. LOSSAINT
FL, USA
3056806786/3056806786
Final Receiver/Destinatario Final
DAPHKA DESMARET
Mobile Number/No. Móvil
40652782
Expected Foreign Country Payout Location/Locación
Donde Esperan el Pago en país extranjero:
Haiti/Haití
Service Type/Tipo de Servicio
MONEY IN MINUTES/DINERO EN MINUTOS
Date Available in Final Receiver's Country/Fecha
Disponible en el País del Destinatario Final
December 20, 2020/Diciembre 20, 2020
Transfer Amount/
Cantidad de Envío 230.00 USD
Transfer Fees/
Cargos por Envío + 12.00 USD
Additional Fees/
Cargos Adicionales + 0.00 USD
Transfer Taxes/
Impuestos de Envío + 0.00 USD
Promotion Discount/
Descuento Promocional USD
Total / Total 242.00 USD
Estimated Exchange Rate/Tipo de Cambio Estimado
1 USD = 89.9865 HTG
Estimated Transfer Amount/
Cantidad Estimada de
Envío 16 086.90 HTG
Estimated Haiti Central
Bank Fee/
Estimado Cargo del Banco 104.97 HTG

WESTERN UNION
NOT A RECEIPT/
NO ES UN RECIBO
PUBLIX #1090
5715 NW 7TH ST. AIRPARK PLAZA, FL
Date of Transaction/Fecha de las Transacciones
December 20, 2020/Diciembre 20, 2020
Sender/Remitente
JOFF P. LOSSAINT
FL, USA
3056806786/3056806786
Final Receiver/Destinatario Final
DAPHKA DESMARET
Mobile Number/No. Móvil
40652782
Expected Foreign Country Payout Location/Locación
Donde Esperan el Pago en país extranjero:
Haiti/Haití
Service Type/Tipo de Servicio
MONEY IN MINUTES/DINERO EN MINUTOS
Transfer Amount/
Cantidad de Envío 230.00 USD
Transfer Fees/
Cargos por Envío + 12.00 USD
Additional Fees/
Cargos Adicionales + 0.00 USD
Transfer Taxes/
Impuestos de Envío + 0.00 USD
Promotion Discount/
Descuento Promocional USD
Total / Total 242.00 USD
Estimated Exchange Rate/Tipo de Cambio Estimado
1 USD = 89.9865 HTG
Estimated Transfer Amount/
Cantidad Estimada de
Envío 16 086.90 HTG
Estimated Haiti Central
Bank Fee/
Estimado Cargo del Banco 104.97 HTG

UNITED POSTAL

7019 2260 0001 2045 6157

Selected delivery date specified for domestic use.
Domestic shipments include up to \$50 of insurance.
US Tracking® included for domestic.
Not included International insurance.
When used internationally, a customs form is required.
Insurance does not cover certain items. For details, see the International Mail Manual at <http://pe.usps.com>.

LAT RATE ENVELOPE
LAT RATE ■ ANY WEIGHT

TRACKED ■ INSURED

To schedule free Package Pickup, scan the QR code.

FROM: JOFF S.W. Philsaint
MIAMI, FL
TO: USC&S
MIAMI, FL 33015
Hialeah

Proof of Child Support

Enregistré
Au Consulat d'Haïti
à Miami, Fla. E.U.A.
CC# 5887
Le 18 Avril 2016

LIBERTÉ
ÉGALITÉ
FRATERNITÉ

Consulat Général
de la
République d'Haïti
Miami, Florida

COPY

Par
CC# 5887
Au: Nos C&M / 5887
Valeur
Perçue
40

Donner pleine et entière autorisation à Madame Daphne DESMARET, propriétaire, demeurant et domiciliée en Haïti, identifiée au CIN. 01-01-99-1995-06-00-295, aux fins de le représenter auprès des autorités compétentes en Haïti, pour faire la déclaration de son fils: GIOVANNY STENN WROY PHILOSSAINT, de sexe masculin, né à Port-au-Prince, le Premier Janvier Deux Mille Seize (01 Janvier 2016), de ses œuvres avec la mandataire.-

En conséquence, Mme Lise Daphne DESMARET est autorisée à faire les déclarations de naissance par-devant les autorités concernées, signer tous documents y relatifs, payer tous frais nécessaires, recevoir les Actes de Naissance, être domicilié, et d'une manière générale, faire tout ce qui sera nécessaire pour arriver à l'exécution complète des présents pouvoirs.-

DONT ACTE

Fait et passé au Consulat Général de la République d'Haïti à Miami, ce Lundi Dix-huit Avril Deux Mille Seize.-

Et après lecture, le comparant a signé avec Nous.-

Ainsi Signé: M. Joff Steinn Wroy PHILOSSAINT.

Ketty B. DOUGE, Consul.

JOFF STENN WROY PHILOSSAINT

KETTY B. DOUGE

Lequel comparant a, par ces présentes, déclaré :

Monsieur Joff Steinn Wroy PHILOSSAINT, de nationalité Haïtienne, propriétaire, demeurant en Floride et domicilié en Haïti, identifié par son passeport au no. PP3209694 expirant le 03 Septembre 2019.-

A COMPARER :

Par-devant Nous, Ketty B. DOUGE, Consul de la République d'Haïti à Miami, soussignée, remplissant les fonctions de Notaire conformément aux dispositions de l'Article 86 C de la Loi Organique du Département des Affaires Étrangères du 17 Septembre 1958, modifiant la Loi du 14 Septembre 1953 sur le Service Consulaire.-

Proof of Child Support

Certificat de Naissance
J/P Haitian Relief Organization

Prénom [REDACTED]
Nom de Famille Philippe
Sexe Masculin
Né (e) le [REDACTED]
Lieu de Naissance Hopital J.P. HRO Port-au-Prince
Poids à la Naissance 2,200 kg
Enfant de Pauline Bonavent 27 ans 11/15 Philippe
En présence de Dr Jean Mary & Christian

J/P HRO HAITIAN RELIEF ORGANIZATION

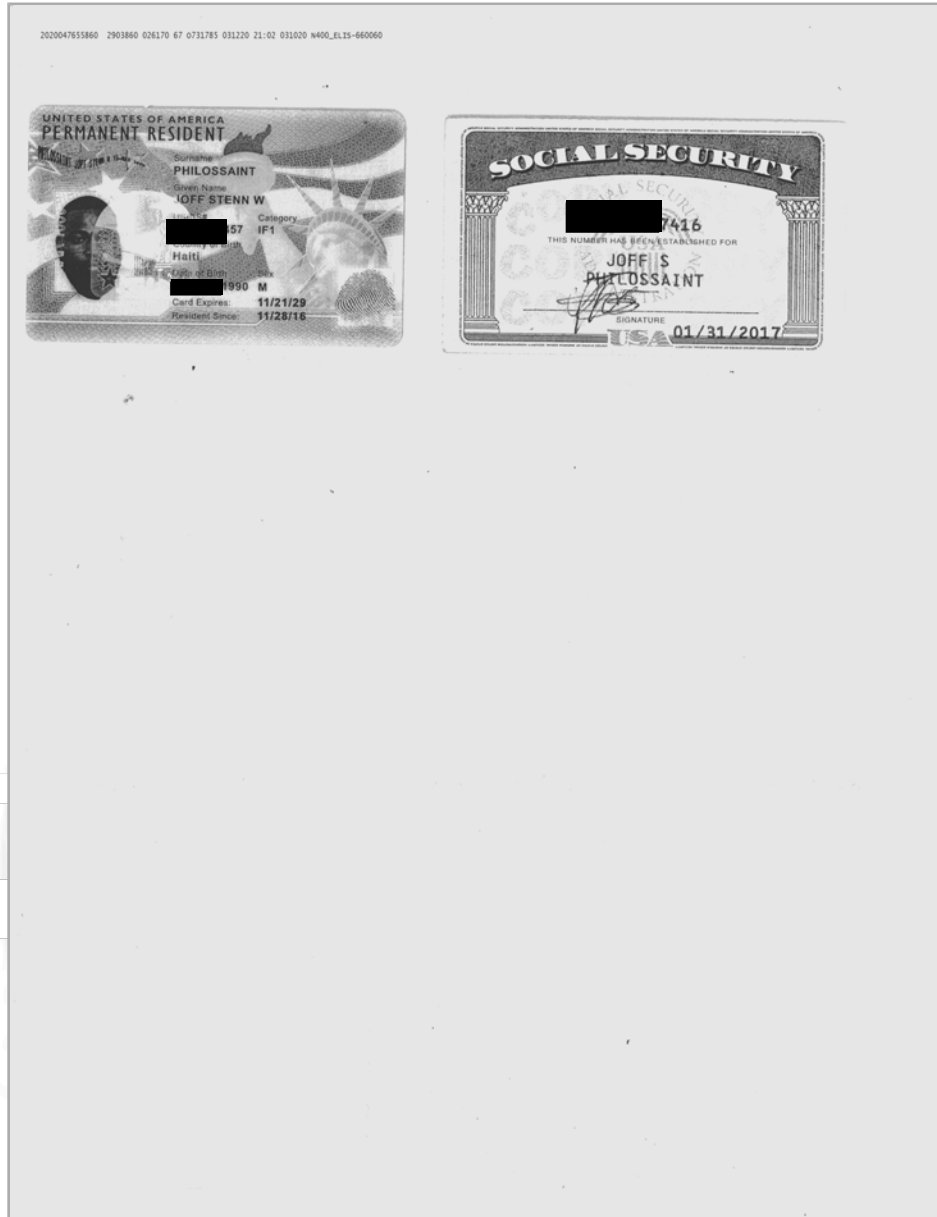
Docteur Responsable [Signature]
Date 14/03/2016

MEDICAL

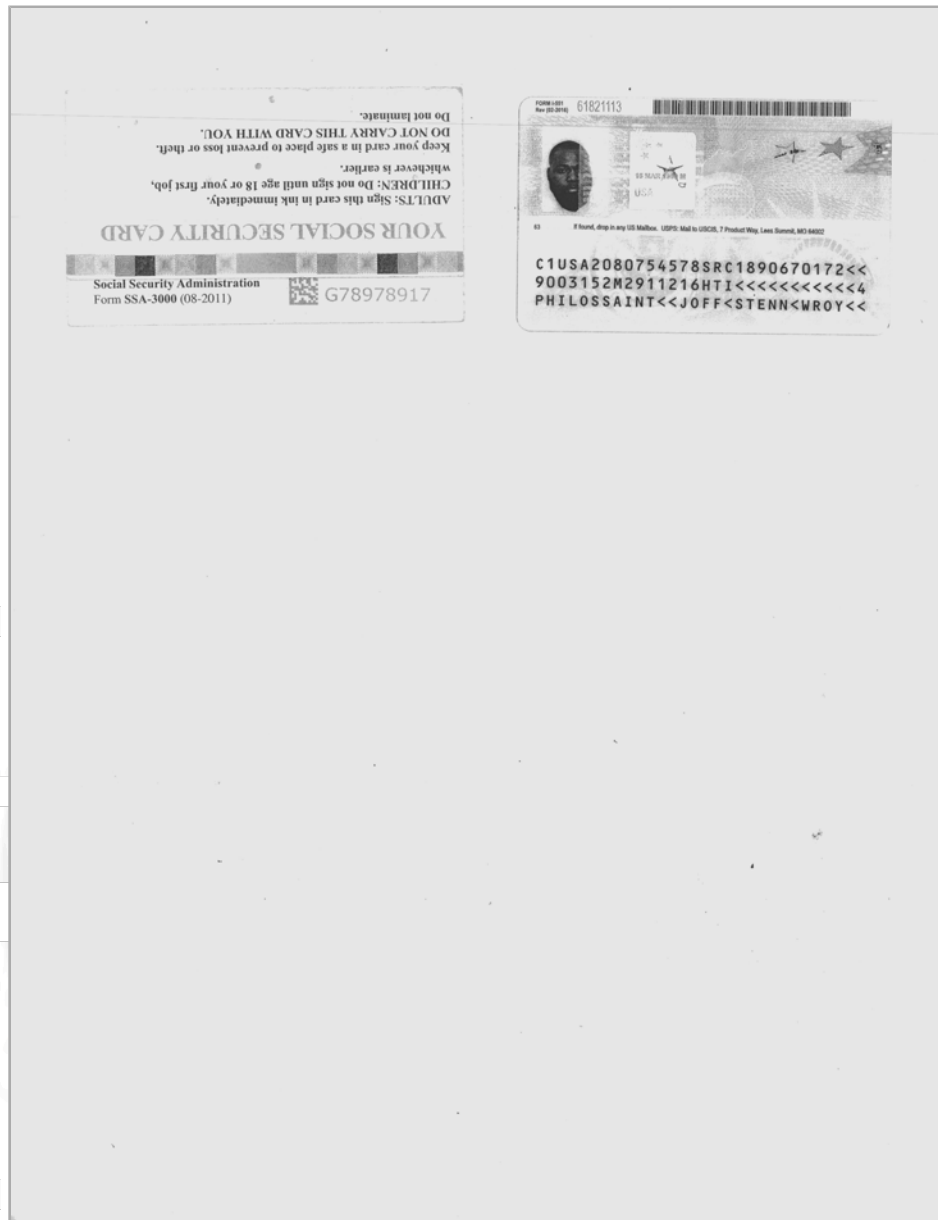
Birth Certificate(s)

Discharge Note-Nursing * Final Report *	PHILOSSAINT, [REDACTED]
PHILOSSAINT, [REDACTED]	DOB: [REDACTED] 2020 MRN: 5255716 Visit Date: 03/04/2020
Inpatient Discharge Instructions	
Your Care Team	
Admitting Physician -	[REDACTED]
Attending Physician -	[REDACTED]
Primary Care Physician -	[REDACTED]
Referring Physician -	[REDACTED]
Reason for Your Visit	
n/a	
Your Diagnosis	
[REDACTED]	
Discharge Vitals	
[REDACTED]	
Instructions From Health Care Providers	
Discharge Plan	
[REDACTED]	
Printed by: CASSEUS, DIEULIFORT Printed on: 03/14/2020 13:28 EDT	
Page 2 of 37	

Other



Other

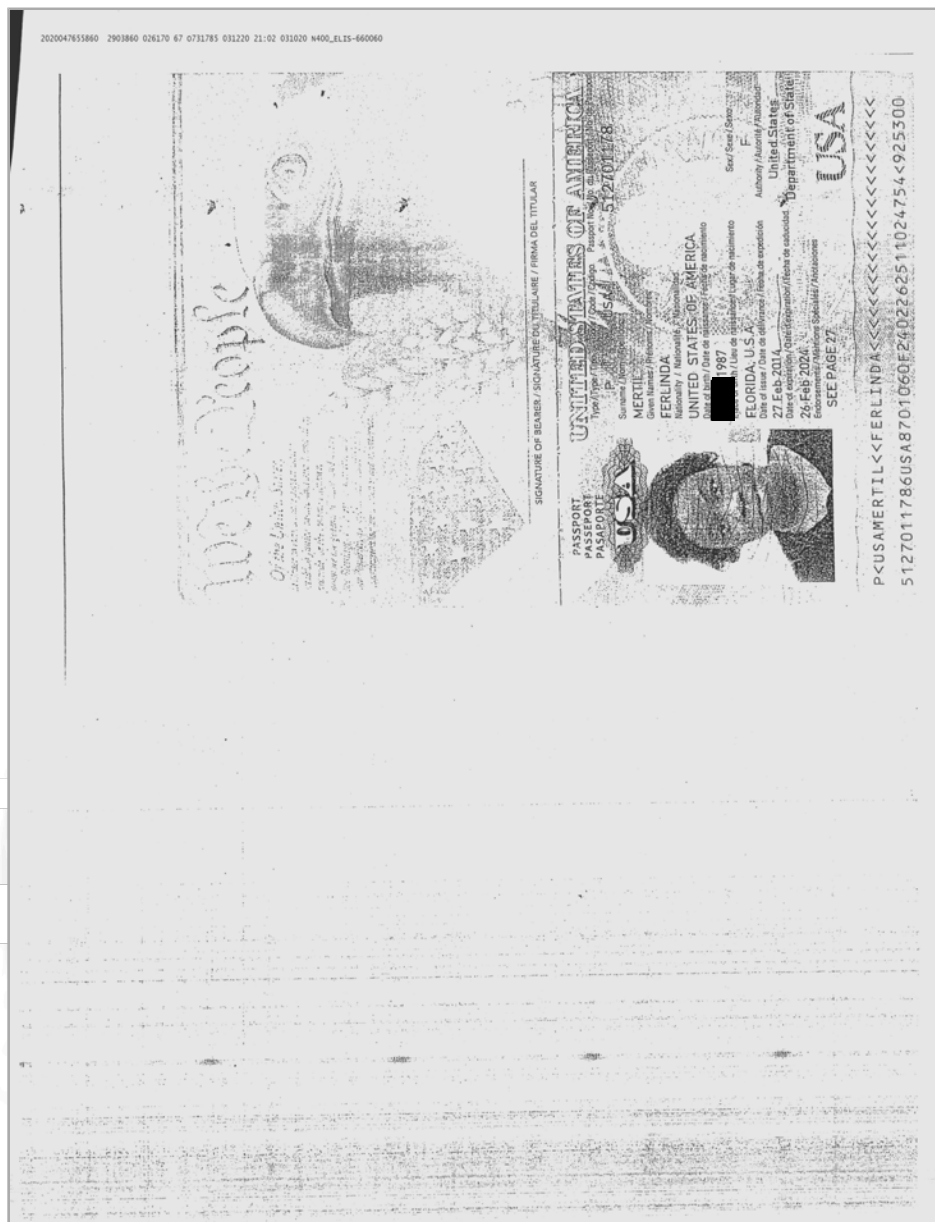


Other






Other



Other

2020047655860 2903860 026170 67 0731785 031220 21:02 031020 N400_ELIS-660060

 Passport Number : [REDACTED] 594
Passport Country of Issuance : **Haiti**

	Date	Type	Location
1	2019-04-08	Arrival	MIA
2	2019-04-05	Departure	MIA
3	2018-10-16	Arrival	HOU
4	2018-10-09	Departure	HOU
5	2018-08-06	Arrival	MIA
6	2018-08-06	Departure	MIA
7	2017-10-30	Arrival	FTL
8	2017-10-26	Departure	Unavailable
9	2017-07-07	Departure	Unavailable
10	2017-06-20	Arrival	MIA
11	2017-06-16	Departure	Unavailable
12	2016-01-10	Arrival	FTL

Other

2020047655860 2903860 026170 67 0731785 031220 21:02 031020 N400_ELS-660060

Department of Health • Vital Statistics
STATE OF FLORIDA
MARRIAGE RECORD
TYPE IN UPPER CASE
USE BLACK INK
This license not valid unless seal of Clerk,
Circuit or County Court, appears thereon.

Official Record
Date: FEB 04 2018
Rec #: 234403

(STATE FILE NUMBER)

2016-001721
APPLICATION NUMBER

STATE OF FLORIDA, COUNTY OF MIAMI-DADE
I HEREBY CERTIFY that the above named persons have been lawfully joined in marriage by me on the date and at the place herein stated.
SIGNED: ERIN SOLIS
JAN 26 2018

APPLICATION TO MARRY

1. NAME OF SPOUSE (First, Middle, Last) JOFF STENN WROY PHILOSAINT		1d. MARDEN SURNAME (if applicable)	2. DATE OF BIRTH (Month, Day, Year) 1990
3a. RESIDENCE - CITY, TOWN, OR LOCATION EL PORTAL	3b. COUNTY MIAMI-DADE	3c. STATE FLORIDA	4. BIRTHPLACE (State or Foreign Country) HAWAII
5. NAME OF SPOUSE (First, Middle, Last) FERLINDA (NMN) MERTIL		5d. MARDEN SURNAME (if applicable)	6. DATE OF BIRTH (Month, Day, Year) 1987
7a. RESIDENCE - CITY, TOWN, OR LOCATION EL PORTAL	7b. COUNTY MIAMI-DADE	7c. STATE FLORIDA	8. BIRTHPLACE (State or Foreign Country) FLORIDA

WE THE APPLICANTS NAMED IN THIS CERTIFICATE, EACH FOR HIMSELF OR HERSELF, STATE THAT THE INFORMATION PROVIDED ON THIS RECORD IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THAT NO LEGAL OBJECTION TO THE MARRIAGE NOR THE ISSUANCE OF A LICENSE TO AUTHORIZE THE SAME IS KNOWN TO US AND HEREBY APPLY FOR LICENSES TO MARRY.

9. SIGNATURE OF SPOUSE (Sign full name using black ink) <u>[Signature]</u>	10. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) JAN-26-2018
11. TITLE OF OFFICIAL DEPUTY CLERK	12. SIGNATURE OF OFFICIAL (Use black ink) <u>[Signature]</u>
13. SIGNATURE OF SPOUSE (Sign full name using black ink) <u>[Signature]</u>	14. SUBSCRIBED AND SWORN TO BEFORE ME ON (DATE) JAN-26-2018
15. TITLE OF OFFICIAL DEPUTY CLERK	16. SIGNATURE OF OFFICIAL (Use black ink) <u>[Signature]</u>

LICENSE TO MARRY

AUTHORIZATION AND LICENSE IS HEREBY GIVEN TO ANY PERSON DULY AUTHORIZED BY THE LAWS OF THE STATE OF FLORIDA TO PERFORM A MARRIAGE CEREMONY WITHIN THE STATE OF FLORIDA AND TO SOLEMNIZE THE MARRIAGE OF THE ABOVE NAMED PERSONS. THIS LICENSE MUST BE USED ON OR AFTER THE EFFECTIVE DATE AND ON OR BEFORE THE EXPIRATION DATE IN THE STATE OF FLORIDA IN ORDER TO BE RECORDED AND VALID.

17. COUNTY ISSUING LICENSE MIAMI-DADE	18. DATE LICENSE ISSUED JAN-26-2018	19a. DATE LICENSE EFFECTIVE JAN-29-2018	19. EXPIRATION DATE MAR-25-2018
20a. SIGNATURE OF COURT CLERK OR JUDGE <u>[Signature]</u>		20b. TITLE CLERK	20c. BY D.C. <u>MF</u>

CERTIFICATE OF MARRIAGE

I HEREBY CERTIFY THAT THE ABOVE NAMED SPOUSES WERE JOINED BY ME IN MARRIAGE IN ACCORDANCE WITH THE LAWS OF THE STATE OF FLORIDA.

21. DATE OF MARRIAGE (Month, Day, Year) FEB 04 2018	22. CITY, TOWN, OR LOCATION OF MARRIAGE MIAMI-DADE
23a. SIGNATURE OF PERSON PERFORMING THE CEREMONY (Use black ink) <u>ERIN SOLIS</u>	23c. ADDRESS (if person performing ceremony) 10000 DISCIPINE BLVD., MIAMI, FL
23b. NAME AND TITLE OF PERSON PERFORMING THE CEREMONY (Or notary stamp) ERIN SOLIS DEPUTY CLERK	24. SIGNATURE OF WITNESS TO CEREMONY <u>[Signature]</u>
	25. SIGNATURE OF WITNESS TO CEREMONY <u>[Signature]</u>

INFORMATION BELOW FOR USE BY VITAL STATISTICS ONLY - NOT TO BE RECORDED

26. SOCIAL SECURITY NUMBER	27. RACE BLACK	28. WERE YOU EVER PREVIOUSLY MARRIED? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	29a. NO. OF THIS MARRIAGE 1	29b. LAST MARRIAGE ENDED BY (Death, Divorce, or Annulment)	29c. DATE LAST MARRIAGE ENDED
30. SOCIAL SECURITY NUMBER 591-48-5745	31. RACE BLACK	32. WERE YOU EVER PREVIOUSLY MARRIED? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES	33a. NO. OF THIS MARRIAGE 1	33b. LAST MARRIAGE ENDED BY (Death, Divorce, or Annulment)	33c. DATE LAST MARRIAGE ENDED

IN Form 743, 01/2015, Florida Administrative Code Rule 64V-1.020 (Obsoletes Previous Editions)

Other

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STATE OF FLORIDA
BUREAU of VITAL STATISTICS

CERTIFICATION OF BIRTH

STATE FILE NUMBER: 109-1987-003187 DATE FILED: January 26, 1987

CHILD'S NAME: F [REDACTED] M [REDACTED]

DATE OF BIRTH: [REDACTED] 1987

SEX: FEMALE

COUNTY OF BIRTH: MIAMI DADE COUNTY

MOTHER'S MAIDEN NAME: SAINTILIA TASSY

FATHER'S NAME: FERDINAND MERTIL

DATE ISSUED: January 28, 2014

C. Meade G. Jr., State Registrar

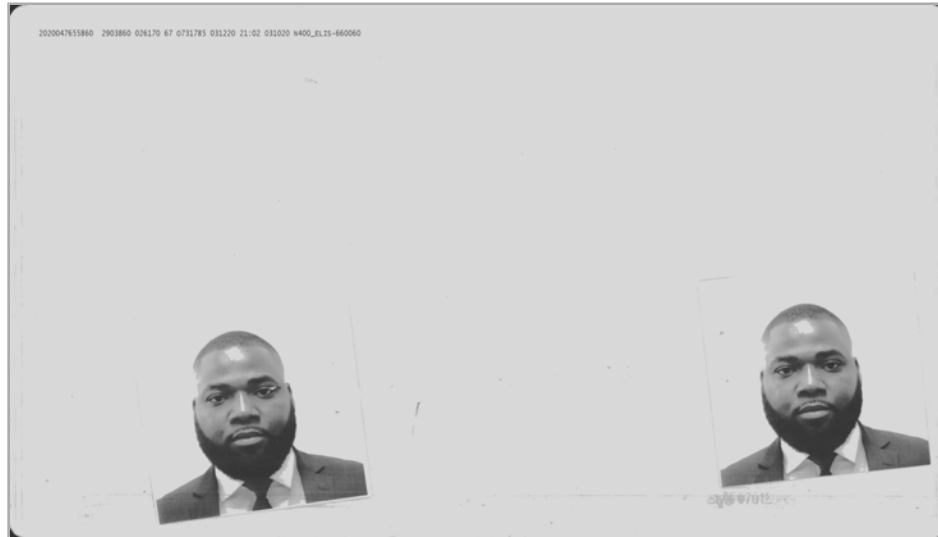
REQ: 2014536379

THE ABOVE SIGNATURE CERTIFIES THAT THIS IS A TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE.

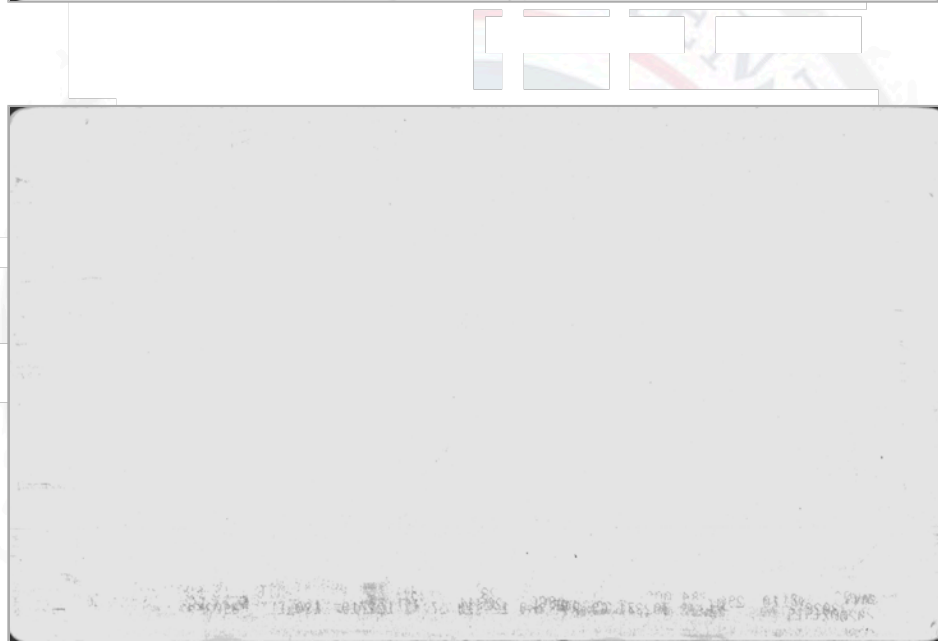
WARNING: THIS DOCUMENT IS PRINTED OR PHOTOCOPIED ON SECURITY PAPER WITH WATERMARKS OF THE GREAT SEAL OF THE STATE OF FLORIDA. DO NOT ACCEPT ANY COPY VERIFYING THE PRESENCE OF THE WATERMARKS. THE DOMINANT PAGES CONTAIN A GREEN COLORED SHEET-GROUP, GOLD EMBOSSED SEAL, AND THIN PAPER. IF THE SIGNATURE IS REPRODUCED WITH TEXT, THE DOCUMENT WILL NOT BE COPIED.

OFF FORM 1946 (02-13)

Other



Other



Other

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Transaction Payment Form

	Check/Money Order Number	Check/Money Order Amount
1	1029	725
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		

Extractors
Complete the following:
SID
Number of Checks ☒
Number of G-1450 ☐
If no form of payment is found, circle if I-912 is present: ☒ Y

Doc Prep Operators
Complete the following:
Doc Prep SID
Doc Prep QC SID
Bin Integrity Review
If transaction is removed from original bin document bin number below:
Original Bin Number

Quality Review
Team Leads/Supervisors/Managers complete the following if applicable:
TPF Reviewed SID (Confirm no checks are present)
TPF Correction SID (Confirm TPF corrections made)

Scanning Operators
Circle if payment validation was performed. ☒ Y

This form is intended to be a record of payment(s) received with the submission, however, should not be used as a record of payment(s) accepted with the submission. (Revision 8/17/2018)

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N-400 Inventory Checklist

☐ N-426 - Request For Certification of Military or Naval Service

☒ Two Photographs

Special Documents (SD)

☐ FD-258 - Fingerprint Card

☐ Original I-551 - Permanent Resident Card

Hard to Replace Documents (HRO)

☐ Original US or Foreign Passport

☐ Original Foreign Document

USCIS USE ONLY

Boot Camp Training (BCT) Location

Select a location from the dropdown:

07/03/17 v2.0

N-400

For USCIS Use Only	Date Stamp	Receipt	Action Block
Remarks			

Application for Naturalization
Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form N-400
OMB No. 1615-0052
Expires 09/30/2022

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▶ **START HERE - Type or print in black ink.** Type or print "N/A" if an item is not applicable or the answer is none, unless otherwise indicated. Failure to answer all of the questions may delay U.S. Citizenship and Immigration Services (USCIS) processing your Form N-400. **NOTE: You must complete Parts 1. - 15.**

If your biological or legal adoptive mother or father is a U.S. citizen by birth, or was naturalized before you reached your 18th birthday, you may already be a U.S. citizen. Before you consider filing this application, please visit the USCIS Website at www.uscis.gov for more information on this topic and to review the instructions for Form N-600, Application for Certificate of Citizenship, and Form N-600K, Application for Citizenship and Issuance of Certificate Under Section 322.

NOTE: Are either of your parents a United States citizen? If you answer "Yes," then complete **Part 6. Information About Your Parents** as part of this application. If you answer "No," then skip **Part 6**, and go to **Part 7. Biographic Information.**

Part 1. Information About Your Eligibility (Select only one box or your Form N-400 may be delayed)

Enter Your 9 Digit A-Number: **A- 2 0 8 0 7 5 4 5 7**

1. You are at least 18 years of age **and**:

A. ☐ Have been a lawful permanent resident of the United States for at least 5 years.

B. ☒ Have been a lawful permanent resident of the United States for at least 3 years. In addition, you have been married to and living with the same U.S. citizen spouse for the last 3 years, **and** your spouse has been a U.S. citizen for the last 3 years at the time you filed your Form N-400.

C. ☐ Are a lawful permanent resident of the United States **and** you are the spouse of a U.S. citizen **and** your U.S. citizen spouse is regularly engaged in specified employment abroad. (See the Immigration and Nationality Act (INA) section 319(b).) If your residential address is outside the United States and you are filing under Section 319(b), select the USCIS Field Office from the list below where you would like to have your naturalization interview:

D. ☐ Are applying on the basis of qualifying military service.

E. ☐ Other (Explain):

Part 2. Information About You (Person applying for naturalization)

1. Your Current Legal Name (**do not** provide a nickname)

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
PHILOSAINT JOFF STENN WROY

2. Your Name Exactly As It Appears on Your Permanent Resident Card (if applicable)

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
PHILOSAINT JOFF STENN WROY

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Part 2. Information About You (Person applying for naturalization) (continued) A- 2 0 8 0 7 5 4 5 7

3. Other Names You Have Used Since Birth (include nicknames, aliases, and maiden name, if applicable)

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
NONE		

4. Name Change (Optional)

Read the Form N-400 Instructions before you decide whether or not you would like to legally change your name.

Would you like to legally change your name? ☐ Yes ☒ No

If you answered "Yes," type or print the new name you would like to use in the spaces provided below.

Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)

5. U.S. Social Security Number (if applicable) 6. USCIS Online Account Number (if any)

▶ 7 4 1 6 ▶

7. Gender ☒ Male ☐ Female 8. Date of Birth (mm/dd/yyyy) 9. Date You Became a Lawful Permanent Resident (mm/dd/yyyy)

1990 11/28/2016

10. Country of Birth 11. Country of Citizenship or Nationality

HAITI HAITI

12. Do you have a physical or developmental disability or mental impairment that prevents you from demonstrating your knowledge and understanding of the English language and/or civics requirements for naturalization? ☐ Yes ☒ No

If you answered "Yes," submit a completed Form N-648, Medical Certification for Disability Exceptions, when you file your Form N-400.

13. Exemptions from the English Language Test

A. Are you 50 years of age or older and have you lived in the United States as a lawful permanent resident for periods totaling at least 20 years at the time you file your Form N-400? ☐ Yes ☒ No

B. Are you 55 years of age or older and have you lived in the United States as a lawful permanent resident for periods totaling at least 15 years at the time you file your Form N-400? ☐ Yes ☒ No

C. Are you 65 years of age or older and have you lived in the United States as a lawful permanent resident for periods totaling at least 20 years at the time you file your Form N-400? (If you meet this requirement, you will also be given a simplified version of the civics test.) ☐ Yes ☒ No

Part 3. Accommodations for Individuals With Disabilities and/or Impairments

NOTE: Read the information in the Form N-400 Instructions before completing this part.

1. Are you requesting an accommodation because of your disabilities and/or impairments? ☐ Yes ☒ No

If you answered "Yes," select any applicable box.

A. ☐ I am deaf or hard of hearing and request the following accommodation. (If you are requesting a sign-language interpreter, indicate for which language (for example, American Sign Language).)

B. ☐ I am blind or have low vision and request the following accommodation:

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Part 3. Accommodations for Individuals With Disabilities and/or Impairments (continued) A- 2 0 8 0 7 5 4 5 7

C. ☐ I have another type of disability and/or impairment (for example, use a wheelchair). (Describe the nature of your disability and/or impairment and the accommodation you are requesting.)

Part 4. Information to Contact You

1. Daytime Telephone Number 3056806786 2. Work Telephone Number (if any) 3056806786

3. Evening Telephone Number 3056806786 4. Mobile Telephone Number (if any) 3056806786

5. Email Address (if any) jswphilossaint@gmail.com

Part 5. Information About Your Residence

1. Where have you lived during the last five years? Provide your most recent residence and then list every location where you have lived during the last five years. If you need extra space, use additional sheets of paper.

A. Current Physical Address

Street Number and Name Apt. Ste. Flr. Number
[REDACTED] ☒ ☐ ☐ 702

City or Town County State ZIP Code + 4
MIAMI DADE FL [REDACTED] - [REDACTED]

Province or Region (foreign address only) Postal Code (foreign address only) Country (foreign address only)
[REDACTED] [REDACTED] USA

Dates of Residence From (mm/dd/yyyy) To (mm/dd/yyyy)
06/01/2017 Present


B. Current Mailing Address (if different from the address above)

In Care Of Name (if any)
ALEX TELFORT

Street Number and Name Apt. Ste. Flr. Number
[REDACTED] ☐ ☐ ☐ [REDACTED]

City or Town County State ZIP Code + 4
MIAMI DADE FL [REDACTED] - [REDACTED]

Province or Region (foreign address only) Postal Code (foreign address only) Country (foreign address only)
[REDACTED] [REDACTED] USA

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Part 5. Information About Your Residence (continued) A- 2 0 8 0 7 5 4 5 7

C. Physical Address 2

Street Number and Name Apt. ☐ Ste. ☐ Flr. ☐ Number

City or Town County State ZIP Code + 4 -

Province or Region (foreign address only) Postal Code (foreign address only) Country (foreign address only)

Dates of Residence From (mm/dd/yyyy) To (mm/dd/yyyy)

01/10/2016 06/01/2017

D. Physical Address 3

Street Number and Name Apt. ☐ Ste. ☐ Flr. ☐ Number

City or Town County State ZIP Code + 4 -

Province or Region (foreign address only) Postal Code (foreign address only) Country (foreign address only)

Dates of Residence From (mm/dd/yyyy) To (mm/dd/yyyy)

E. Physical Address 4

Street Number and Name Apt. ☐ Ste. ☐ Flr. ☐ Number

City or Town County State ZIP Code + 4 -

Province or Region (foreign address only) Postal Code (foreign address only) Country (foreign address only)

Dates of Residence From (mm/dd/yyyy) To (mm/dd/yyyy)

Part 6. Information About Your Parents


If neither one of your parents is a United States citizen, then skip this part and go to Part 7.

1. Were your parents married before your 18th birthday? ☒ Yes ☐ No

Information About Your Mother

2. Is your mother a U.S. citizen? ☐ Yes ☒ No

If you answered "Yes," complete the following information. If you answered "No," go to Item Number 3.

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Part 6. Information About Your Parents (continued) A- 2 0 8 0 7 5 4 5 7

A. Current Legal Name of U.S. Citizen Mother

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

B. Mother's Country of Birth C. Mother's Date of Birth (mm/dd/yyyy)

D. Date Mother Became a U.S. Citizen (if known) (mm/dd/yyyy) E. Mother's A-Number (if any)

► A-

Information About Your Father

3. Is your father a U.S. citizen? ☐ Yes ☒ No

If you answered "Yes," complete the information below. If you answered "No," go to **Part 7**.

A. Current Legal Name of U.S. Citizen Father

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

B. Father's Country of Birth C. Father's Date of Birth (mm/dd/yyyy)

D. Date Father Became a U.S. Citizen (if known) (mm/dd/yyyy) E. Father's A-Number (if any)

► A-

Part 7. Biographic Information

NOTE: USCIS requires you to complete the categories below to conduct background checks. (See the Form N-400 Instructions for more information.)

1. Ethnicity (Select **only one** box)

☐ Hispanic or Latino ☒ Not Hispanic or Latino

2. Race (Select **all applicable** boxes)

☐ White ☐ Asian ☒ Black or African American ☐ American Indian or Alaska Native ☐ Native Hawaiian or Other Pacific Islander


3. Height Feet Inches 4. Weight Pounds

5. Eye color (Select **only one** box)

☐ Black ☐ Blue ☒ Brown ☐ Gray ☐ Green ☐ Hazel ☐ Maroon ☐ Pink ☐ Unknown/Other

6. Hair color (Select **only one** box)

☐ Bald (No hair) ☒ Black ☐ Blond ☐ Brown ☐ Gray ☐ Red ☐ Sandy ☐ White ☐ Unknown/Other

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Part 8. Information About Your Employment and Schools You Attended A- 2 0 8 0 7 5 4 5 7

List where you have worked or attended school full time or part time during the last five years. Provide information for the complete time period. Include all military, police, and/or intelligence service. Begin by providing information about your most recent or current employment, studies, or unemployment (if applicable). Provide the locations and dates where you worked, were self-employed, were unemployed, or have studied for the last five years. If you worked for yourself, type or print "self-employed." If you were unemployed, type or print "unemployed." If you need extra space, use additional sheets of paper.

1. Employer or School Name
ROYAL ELITE TRANS LLC

Street Number and Name Apt. Ste. Flr. Number
OVER THE ROAD ☐ ☐ ☐ ☐

City or Town State ZIP Code + 4
OVER THE ROAD FL ☐ - ☐

Province or Region Postal Code Country
(foreign address only) (foreign address only) (foreign address only)
☐ ☐ USA

Date From (mm/dd/yyyy) Date To (mm/dd/yyyy) Your Occupation
10/2018 PRESENT DRIVER

2. Employer or School Name
DANIA BCH CASINO

Street Number and Name Apt. Ste. Flr. Number
DANIA BCH ☐ ☐ ☐ ☐

City or Town State ZIP Code + 4
DANIA FL ☐ - ☐

Province or Region Postal Code Country
(foreign address only) (foreign address only) (foreign address only)
☐ ☐ USA

Date From (mm/dd/yyyy) Date To (mm/dd/yyyy) Your Occupation
06/02/2016 10/20/2018 ENGINEERING


3. Employer or School Name

Street Number and Name Apt. Ste. Flr. Number
 ☐ ☐ ☐ ☐

City or Town State ZIP Code + 4
 -

Province or Region Postal Code Country
(foreign address only) (foreign address only) (foreign address only)

Date From (mm/dd/yyyy) Date To (mm/dd/yyyy) Your Occupation

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Part 9. Time Outside the United States A- 2 0 8 0 7 5 4 5 7

1. How many **total days (24 hours or longer)** did you spend outside the United States during the last 5 years? 32 days

2. How many trips of **24 hours or longer** have you taken outside the United States during the last 5 years? 6 trips

3. List below all the trips of **24 hours or longer** that you have taken outside the United States during the last 5 years. Start with your most recent trip and work backwards. If you need extra space, use additional sheets of paper.

Date You Left the United States (mm/dd/yyyy)	Date You Returned to the United States (mm/dd/yyyy)	Did Trip Last 6 Months or More?	Countries to Which You Traveled	Total Days Outside the United States
04/05/2019	04/08/2019	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	HAITI	3
10/09/2018	10/16/2018	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	BRASIL	7
08/06/2018	08/06/2018	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	HAITI	1
10/26/2017	10/30/2017	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	HAITI	4
07/07/2017	07/10/2017	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	BAHAMAS CRUISE	3
06/16/2017	06/20/2017	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	DOMINICAN REPUBLIC	

Part 10. Information About Your Marital History

1. What is your current marital status?
☐ Single, Never Married ☒ Married ☐ Divorced ☐ Widowed ☐ Separated ☐ Marriage Annulled
If you are single and have **never** married, go to **Part 11**.

2. If you are married, is your spouse a current member of the U.S. armed forces? ☐ Yes ☒ No

3. How many times have you been married (including annulled marriages, marriages to other people, and marriages to the same person)? 1


4. If you are married now, provide the following information about your current spouse.

A. Current Spouse's Legal Name
Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
MERTIL FERLINDA

B. Current Spouse's Previous Legal Name
Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
NONE

C. Other Names Used by Current Spouse (include nicknames, aliases, and maiden name, if applicable)
Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
NONE

D. Current Spouse's Date of Birth (mm/dd/yyyy) E. Date You Entered into Marriage with Current Spouse (mm/dd/yyyy)
987 02/04/2016

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Part 10. Information About Your Marital History (continued) A- 2 0 8 0 7 5 4 5 7

F. Current Spouse's Present Home Address

Street Number and Name Apt. Ste. Flr. Number
SAME AS ABOVE ☐ ☐ ☐ ☐

City or Town County State ZIP Code + 4
 FL -

Province or Region Postal Code Country
(foreign address only) (foreign address only) (foreign address only)
 USA

G. Current Spouse's Current Employer or Company

5. Is your current spouse a U.S. citizen? ☒ Yes ☐ No
If you answered "Yes," answer **Item Number 6**. If you answered "No," go to **Item Number 7**.

6. If your current spouse is a U.S. citizen, complete the following information.

A. When did your current spouse become a U.S. citizen?
☒ At Birth - Go to **Item Number 8**. ☐ Other - Complete the following information.

B. Date Your Current Spouse Became a U.S. Citizen (mm/dd/yyyy)

7. If your current spouse is not a U.S. citizen, complete the following information.

A. Current Spouse's Country of Citizenship or Nationality B. Current Spouse's A-Number (if any)
 ▶ A-

C. Current Spouse's Immigration Status
☐ Lawful Permanent Resident ☐ Other (Explain):

8. How many times has your current spouse been married (including annulled marriages, marriages to other people, and marriages to the same person)? If your current spouse has been married before, provide the following information about your current spouse's prior spouse. 1

If your current spouse has had more than one previous marriage, provide that information on additional sheets of paper.


A. Legal Name of My Current Spouse's Prior Spouse

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

B. Immigration Status of My Current Spouse's Prior Spouse (if known)
☐ U.S. Citizen ☐ Lawful Permanent Resident ☐ Other (Explain):

C. Date of Birth of My Current Spouse's Prior Spouse (mm/dd/yyyy) D. Country of Birth of My Current Spouse's Prior Spouse

E. Country of Citizenship or Nationality of My Current Spouse's Prior Spouse

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Part 10. Information About Your Marital History (continued) A- 2 0 8 0 7 5 4 5 7

F. My Current Spouse's Date of Marriage with Prior Spouse (mm/dd/yyyy) G. Date My Current Spouse's Marriage Ended with Prior Spouse (mm/dd/yyyy)

H. How My Current Spouse's Marriage Ended with Prior Spouse
☐ Annulled ☐ Divorced ☐ Spouse Deceased ☐ Other (Explain):

9. If you were married before, provide the following information about your prior spouse. If you have more than one previous marriage, provide that information on additional sheets of paper.

A. My Prior Spouse's Legal Name
Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

B. My Prior Spouse's Immigration Status When My Marriage Ended (if known)
☐ U.S. Citizen ☐ Lawful Permanent Resident ☐ Other (Explain):

C. My Prior Spouse's Date of Birth (mm/dd/yyyy) D. My Prior Spouse's Country of Birth

E. My Prior Spouse's Country of Citizenship or Nationality F. Date of Marriage with My Prior Spouse (mm/dd/yyyy)

G. Date Marriage Ended with My Prior Spouse (mm/dd/yyyy)

H. How Marriage Ended with My Prior Spouse
☐ Annulled ☐ Divorced ☐ Spouse Deceased ☐ Other (Explain):

Part 11. Information About Your Children


1. Indicate your total number of children. (You must indicate ALL children, including: children who are alive, missing, or deceased; children born in the United States or in other countries; children under 18 years of age or older; children who are currently married or unmarried; children living with you or elsewhere; current stepchildren; legally adopted children; and children born when you were not married.)

2. Provide the following information about all your children (sons and daughters) listed in Item Number 1., regardless of age. To list any additional children, use additional sheets of paper.

A. Child 1
Current Legal Name
Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

A-Number (if any) Date of Birth (mm/dd/yyyy) Country of Birth

► A- 2016 HAITI

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Part 11. Information About Your Children (continued) A- 2 0 8 0 7 5 4 5 7

Current Address

Street Number and Name Apt. Ste. Flr. Number
PORT AU PTINCE ☐ ☐ ☐ ☐

City or Town County State ZIP Code + 4
PORT AU PRINCE ☐ ☐ ☐ - ☐

Province or Region Postal Code Country
(foreign address only) (foreign address only) (foreign address only)
☐ ☐ HAITI

What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child) BIOLOGICAL

B. Child 2

Current Legal Name

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
P ☐ J ☐ D ☐

A-Number (if any) Date of Birth (mm/dd/yyyy) Country of Birth
▶ A- ☐ ☐ 2017 USA

Current Address

Street Number and Name Apt. Ste. Flr. Number
WITH US ☐ ☐ ☐ ☐

City or Town County State ZIP Code + 4
MIAMI DADE FL ☐ - ☐

Province or Region Postal Code Country
(foreign address only) (foreign address only) (foreign address only)
☐ ☐ USA

What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child) BIOLOGICAL

C. Child 3

Current Legal Name

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
☐ ☐ ☐

A-Number (if any) Date of Birth (mm/dd/yyyy) Country of Birth
▶ A- ☐ ☐ ☐

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Part 11. Information About Your Children (continued) A- 2 0 8 0 7 5 4 5 7

Current Address

Street Number and Name Apt. Ste. Flr. Number
City or Town County State ZIP Code + 4
Province or Region Postal Code Country
(foreign address only) (foreign address only) (foreign address only)

What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)

D. Child 4

Current Legal Name

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

A-Number (if any) Date of Birth (mm/dd/yyyy) Country of Birth

► A- Current Address

Street Number and Name Apt. Ste. Flr. Number
City or Town County State ZIP Code + 4
Province or Region Postal Code Country
(foreign address only) (foreign address only) (foreign address only)

What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)

Part 12. Additional Information About You (Person Applying for Naturalization)

Answer **Item Numbers 1. - 21.** If you answer "Yes" to any of these questions, include a typed or printed explanation on additional sheets of paper.

1. Have you **EVER** claimed to be a U.S. citizen (in writing or any other way)? ☐ Yes ☒ No

2. Have you **EVER** registered to vote in any Federal, state, or local election in the United States? ☐ Yes ☒ No

3. Have you **EVER** voted in any Federal, state, or local election in the United States? ☐ Yes ☒ No

4. A. Do you now have, or did you **EVER** have, a hereditary title or an order of nobility in any foreign country? ☐ Yes ☒ No

B. If you answered "Yes," are you willing to give up any inherited titles or orders of nobility that you have in a foreign country at your naturalization ceremony? ☐ Yes ☒ No

5. Have you **EVER** been declared legally incompetent or been confined to a mental institution? ☐ Yes ☒ No

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Part 12. Additional Information About You (Person Applying for Naturalization) (continued)

A- 2 0 8 0 7 5 4 5 7

6. Do you owe any overdue Federal, state, or local taxes? ☐ Yes ☒ No

7. A. Have you **EVER** not filed a Federal, state, or local tax return since you became a lawful permanent resident? ☐ Yes ☒ No

B. If you answered "Yes," did you consider yourself to be a "non-U.S. resident"? ☐ Yes ☒ No

8. Have you called yourself a "non-U.S. resident" on a Federal, state, or local tax return since you became a lawful permanent resident? ☐ Yes ☒ No

9. A. Have you **EVER** been a member of, involved in, or in any way associated with, any organization, association, fund, foundation, party, club, society, or similar group in the United States or in any other location in the world? ☐ Yes ☒ No

B. If you answered "Yes," provide the information below. If you need extra space, attach the names of the other groups on additional sheets of paper and provide any evidence to support your answers.

Name of the Group	Purpose of the Group	Dates of Membership	
		From (mm/dd/yyyy)	To (mm/dd/yyyy)

10. Have you **EVER** been a member of, or in any way associated (either directly or indirectly) with:

A. The Communist Party? ☐ Yes ☒ No

B. Any other totalitarian party? ☐ Yes ☒ No

C. A terrorist organization? ☐ Yes ☒ No

11. Have you **EVER** advocated (either directly or indirectly) the overthrow of any government by force or violence? ☐ Yes ☒ No

12. Have you **EVER** persecuted (either directly or indirectly) any person because of race, religion, national origin, membership in a particular social group, or political opinion? ☐ Yes ☒ No


13. Between March 23, 1933 and May 8, 1945, did you work for or associate in any way (either directly or indirectly) with:

A. The Nazi government of Germany? ☐ Yes ☒ No

B. Any government in any area occupied by, allied with, or established with the help of the Nazi government of Germany? ☐ Yes ☒ No

C. Any German, Nazi, or S.S. military unit, paramilitary unit, self-defense unit, vigilante unit, citizen unit, police unit, government agency or office, extermination camp, concentration camp, prisoner of war camp, prison, labor camp, or transit camp? ☐ Yes ☒ No

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Part 12. Additional Information About You (Person Applying for Naturalization) (continued)

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19. Did you **EVER** receive any type of military, paramilitary (a group of people who act like a military group but are not part of the official military), or weapons training?

☐ Yes ☒ No

20. Did you **EVER** recruit (ask), enlist (sign up), conscript (require), or use any person under 15 years of age to serve in or help an armed force or group?

☐ Yes ☒ No

21. Did you **EVER** use any person under 15 years of age to do anything that helped or supported people in combat?

☐ Yes ☒ No

If any of Item Numbers 22. - 28. apply to you, you must answer "Yes" even if your records have been sealed, expunged, or otherwise cleared. You must disclose this information even if someone, including a judge, law enforcement officer, or attorney, told you that it no longer constitutes a record or told you that you do not have to disclose the information.

22. Have you **EVER** committed, assisted in committing, or attempted to commit, a crime or offense for which you were **NOT** arrested?

☐ Yes ☒ No

23. Have you **EVER** been arrested, cited, or detained by any law enforcement officer (including any immigration official or any official of the U.S. armed forces) for any reason?

☐ Yes ☒ No

24. Have you **EVER** been charged with committing, attempting to commit, or assisting in committing a crime or offense?

☐ Yes ☒ No

25. Have you **EVER** been convicted of a crime or offense?

☐ Yes ☒ No

26. Have you **EVER** been placed in an alternative sentencing or a rehabilitative program (for example, diversion, deferred prosecution, withheld adjudication, deferred adjudication)?

☐ Yes ☒ No

27. A. Have you **EVER** received a suspended sentence, been placed on probation, or been paroled?

☐ Yes ☒ No

B. If you answered "Yes," have you completed the probation or parole?

☐ Yes ☒ No

28. A. Have you **EVER** been in jail or prison?

☐ Yes ☒ No

B. If you answered "Yes," how long were you in jail or prison? Years Months Days

29. If you answered "No" to **ALL** questions in **Item Numbers 23. - 28.**, then skip this item and go to **Item Number 30.**

If you answered "Yes" to any question in **Item Numbers 23. - 28.**, then complete this table. If you need extra space, use additional sheets of paper and provide any evidence to support your answers.

Why were you arrested, cited, detained, or charged?	Date arrested, cited, detained, or charged. (mm/dd/yyyy)	Where were you arrested, cited, detained, or charged? (City or Town, State, Country)	Outcome or disposition of the arrest, citation, detention, or charge (no charges filed, charges dismissed, jail, probation, etc.)

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NEED TO KNOW: IF YOU ARE CURRENTLY IN THE U.S. DEPARTMENT OF HOMELAND SECURITY, YOU MUST PROVIDE A CURRENT ADDRESS AND PHONE NUMBER.

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Part 12. Additional Information About You (Person Applying for Naturalization) (continued)

A- 2 0 8 0 7 5 4 5 7

Answer **Item Numbers 30. - 46.** If you answer "Yes" to any of these questions, except **Item Numbers 37. and 38.**, include a typed or printed explanation on additional sheets of paper and provide any evidence to support your answers.

30. Have you EVER:

A. Been a habitual drunkard?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
B. Been a prostitute, or procured anyone for prostitution?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
C. Sold or smuggled controlled substances, illegal drugs, or narcotics?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
D. Been married to more than one person at the same time?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
E. Married someone in order to obtain an immigration benefit?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
F. Helped anyone to enter, or try to enter, the United States illegally?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
G. Gambled illegally or received income from illegal gambling?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
H. Failed to support your dependents or to pay alimony?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
I. Made any misrepresentation to obtain any public benefit in the United States?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

31. Have you EVER given any U.S. Government officials any information or documentation that was false, fraudulent, or misleading? ☐ Yes ☒ No

32. Have you EVER lied to any U.S. Government officials to gain entry or admission into the United States or to gain immigration benefits while in the United States? ☐ Yes ☒ No

33. Have you EVER been removed, excluded, or deported from the United States? ☐ Yes ☒ No

34. Have you EVER been ordered removed, excluded, or deported from the United States? ☐ Yes ☒ No

35. Have you EVER been placed in removal, exclusion, rescission, or deportation proceedings? ☐ Yes ☒ No

36. Are removal, exclusion, rescission, or deportation proceedings (including administratively closed proceedings) currently pending against you? ☐ Yes ☒ No

37. Have you EVER served in the U.S. armed forces? ☐ Yes ☒ No

38. A. Are you currently a member of the U.S. armed forces? ☐ Yes ☒ No

B. If you answered "Yes," are you scheduled to deploy overseas, including to a vessel, within the next three months? (Refer to the **Address Change** section in the Instructions on how to notify USCIS if you learn of your deployment plans after you file your Form N-400.) ☐ Yes ☒ No

C. If you answered "Yes," are you currently stationed overseas? ☐ Yes ☒ No


39. Have you EVER been court-martialed, administratively separated, or disciplined, or have you received an other than honorable discharge, while in the U.S. armed forces? ☐ Yes ☒ No

40. Have you EVER been discharged from training or service in the U.S. armed forces because you were an alien? ☐ Yes ☒ No

41. Have you EVER left the United States to avoid being drafted in the U.S. armed forces? ☐ Yes ☒ No

42. Have you EVER applied for any kind of exemption from military service in the U.S. armed forces? ☐ Yes ☒ No

43. Have you EVER deserted from the U.S. armed forces? ☐ Yes ☒ No

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Part 12. Additional Information About You (Person Applying for Naturalization) (continued)

A- 2 0 8 0 7 5 4 5 7

44. A. Are you a male who lived in the United States at any time between your 18th and 26th birthdays? ☒ Yes ☐ No
(This does not include living in the United States as a lawful nonimmigrant.)

B. If you answered "Yes," when did you register for the Selective Service? Provide the information below.

Date Registered (mm/dd/yyyy)	Selective Service Number
12/13/2016	9 0 2 4 5 0 3 1 8 8

C. If you answered "Yes," but you **did not register** with the Selective Service System and you are:

1. Still under 26 years of age, you must register before you apply for naturalization, and complete the Selective Service information above; **OR**
2. Now 26 to 31 years of age (29 years of age if you are filing under INA section 319(a)), but you did not register with the Selective Service, you must attach a statement explaining why you did not register, and provide a status information letter from the Selective Service.

Answer **Item Numbers 45. - 50.** If you answer "No" to any of these questions, include a typed or printed explanation on additional sheets of paper and provide any evidence to support your answers.

45. Do you support the Constitution and form of Government of the United States? ☒ Yes ☐ No

46. Do you understand the full Oath of Allegiance to the United States? ☒ Yes ☐ No

47. Are you willing to take the full Oath of Allegiance to the United States? ☒ Yes ☐ No

48. If the law requires it, are you willing to bear arms on behalf of the United States? ☒ Yes ☐ No

49. If the law requires it, are you willing to perform noncombatant services in the U.S. armed forces? ☒ Yes ☐ No

50. If the law requires it, are you willing to perform work of national importance under civilian direction? ☒ Yes ☐ No

Part 13. Applicant's Statement, Certification, and Signature

NOTE: Read the **Penalties** section of the Form N-400 Instructions before completing this part.

Applicant's Statement

NOTE: Select the box for either **Item A.** or **B.** in **Item Number 1.** If applicable, select the box for **Item Number 2.**


1. Applicant's Statement Regarding the Interpreter

A. ☒ I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.

B. ☐ The interpreter named in **Part 14.** read to me every question and instruction on this application and my answer to every question in _____, a language in which I am fluent, and I understood everything.

2. Applicant's Statement Regarding the Preparer

☒ At my request, the preparer named in **Part 15.**, ALEX TELFORT, prepared this application for me based only upon information I provided or authorized.

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Part 13. Applicant's Statement, Certification, and Signature (continued) A- 2 0 8 0 7 5 4 5 7

Applicant's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

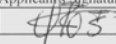
I further authorize release of information contained in this application, in supporting documents, and in my USCIS records to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.

I understand that USCIS will require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, I will be required to sign an oath reaffirming that:

- 1) I reviewed and provided or authorized all of the information in my application;
- 2) I understood all of the information contained in, and submitted with, my application; and
- 3) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that I provided or authorized all of the information in my application, I understand all of the information contained in, and submitted with, my application, and that all of this information is complete, true, and correct.

Applicant's Signature

3. Applicant's Signature Date of Signature (mm/dd/yyyy)
→  02/24/2020

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 14. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

1. Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name)


2. Interpreter's Business or Organization Name (if any)

Interpreter's Mailing Address

3. Street Number and Name Apt. Ste. Fl. Number
 ☐ ☐ ☐

City or Town State ZIP Code + 4
 -

Province Postal Code Country

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Part 14. Interpreter's Contact Information, Certification, and Signature
(continued)

A- 2 0 8 0 7 5 4 5 7

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

5. Interpreter's Mobile Telephone Number (if any)

6. Interpreter's Email Address (if any)

Interpreter's Certification

I certify, under penalty of perjury, that:
I am fluent in English and _____, which is the same language specified in **Part 13., Item B.** in **Item Number 1.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question and answer on the application, including the **Applicant's Certification** and has verified the accuracy of every answer.

Interpreter's Signature

7. Interpreter's Signature

Date of Signature (mm/dd/yyyy)

➔

Part 15. Contact Information, Declaration, and Signature of the Person Preparing This Application, if Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

1. Preparer's Family Name (Last Name)

Preparer's Given Name (First Name)

TELFORT

ALEX

2. Preparer's Business or Organization Name (if any)

YOUR IMMIGRATION S

Preparer's Mailing Address

3. Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code + 4

Province

Postal Code

Country

MIAMI

FL

USA

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Part 15. Contact Information, Declaration, and Signature of the Person Preparing This Application, if Other Than the Applicant (continued)

A- 2 0 8 0 7 5 4 5 7

Preparer's Contact Information

4. Preparer's Daytime Telephone Number 3059495421

5. Preparer's Mobile Telephone Number (if any) 7864396447

6. Preparer's Email Address (if any) NAELLE2006@HOTMAIL.COM

Preparer's Statement

7. A. ☒ I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.

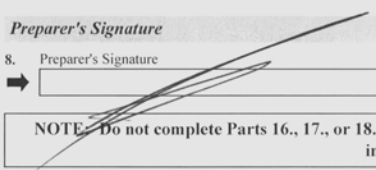
B. ☐ I am an attorney or accredited representative and my representation of the applicant in this case ☐ extends ☐ does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this application, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

8. Preparer's Signature  Date of Signature (mm/dd/yyyy) 02/24/2020

NOTE: Do not complete Parts 16., 17., or 18. until the USCIS Officer instructs you to do so at the interview.

Part 16. Signature at Interview


I swear (affirm) and certify under penalty of perjury under the laws of the United States of America that I know that the contents of this Form N-400, Application for Naturalization, subscribed by me, including corrections number 1 through _____, are complete, true, and correct. The evidence submitted by me on numbered pages 1 through _____ are complete, true, and correct.

Subscribed to and sworn to (affirmed) before me

USCIS Officer's Printed Name or Stamp

Date of Signature (mm/dd/yyyy)

Applicant's Signature _____ USCIS Officer's Signature _____

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Part 17. Renunciation of Foreign Titles A- 2 0 8 0 7 5 4 5 7

If you answered "Yes" to **Part 12., Items A. and B. in Item Number 4.**, then you must affirm the following before a USCIS officer:

I further renounce the title of _____ which I have heretofore held; or
(list titles)

I further renounce the order of nobility of _____ to which I have heretofore belonged.
(list order of nobility)

Applicant's Printed Name _____ Applicant's Signature _____

USCIS Officer's Printed Name _____ USCIS Officer's Signature _____

Date of Signature (mm/dd/yyyy) _____

Part 18. Oath of Allegiance

If your application is approved, you will be scheduled for a public oath ceremony at which time you will be required to take the following Oath of Allegiance immediately prior to becoming a naturalized citizen. By signing below you acknowledge your willingness and ability to take this oath:

I hereby declare on oath, that I absolutely and entirely renounce and abjure all allegiance and fidelity to any foreign prince, potentate, state, or sovereignty, of whom or which I have heretofore been a subject or citizen;

that I will support and defend the Constitution and laws of the United States of America against all enemies, foreign, and domestic;

that I will bear true faith and allegiance to the same;

that I will bear arms on behalf of the United States when required by the law;

that I will perform noncombatant service in the armed forces of the United States when required by the law;


that I will perform work of national importance under civilian direction when required by the law; and

that I take this obligation freely, without any mental reservation or purpose of evasion; so help me God.

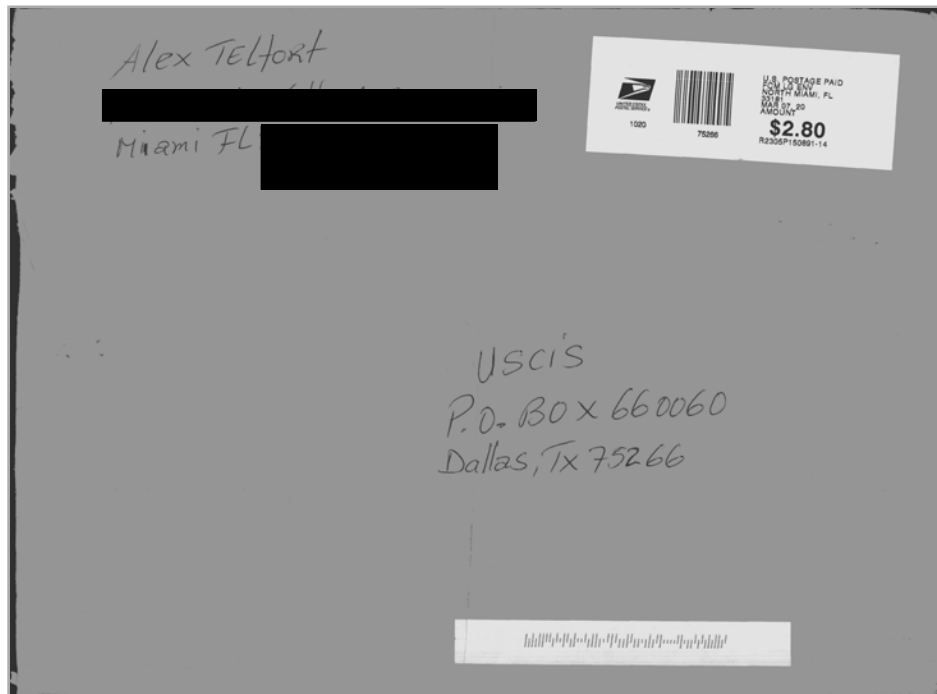
Applicant's Printed Name

Family Name (Last Name) _____ Given Name (First Name) _____ Middle Name (if applicable) _____

Applicant's Signature _____ **Date of Signature (mm/dd/yyyy)** _____

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Envelope



Envelope



Notices

Receipt Number JOE0908647692	USCIS Online Account Number 097208602371	Case Type N400 - APPLICATION FOR NATURALIZATION
Received Date 03/10/2020	Priority Date 03/10/2020	Applicant A308 075-457 JOFF STENN WROY PHILOSSAINT
Notice Date 03/13/2020	Page 1 of 1	

PHILOSSAINT, JOFF STENN WROY
c/o ALEX TELFORT
[REDACTED]
MIAMI FL [REDACTED]

Notice Type: USCIS Account Access Notice
Online Access Code: 98434-2D0E-B7072

Welcome to USCIS!

Thank you for your recent submission. We have created a USCIS Online Account for you. With this account you can:

- check the status of your case.
- sign up to receive email notifications and text messages.
- manage your account preferences and contact information.

Log on and confirm your account within 90 days.

To access your account, please follow the steps below:

1. Visit us online at <https://my.uscis.gov/account>
2. Select "Create a new account" on the right side of the screen, and follow the on-screen instructions for creating a new account in order to login to the system.
3. Select "Add a paper-filed case."
4. Enter your "USCIS case receipt number" and select "Add case."
5. Enter your "Online Access Code" (found on the upper right side of this notice) and your "Date of birth" in the fields provided.
6. Select "Confirm case."

NOTE: Access to your USCIS Online Account will expire 90 days from the receipt date listed at the top of this letter. We will continue processing your application whether or not you access your USCIS Online Account. We strongly encourage you to confirm your USCIS Online Account as soon as possible and then use it in the future as your preferred method for interacting with USCIS. If you do not access your account before your code expires and you wish to access your account, you will need to contact customer service to request that your access code be re-set. If you have questions about how to confirm your USCIS Online account or to request that your access code be re-set, please visit us online at <https://www.uscis.gov/contactcenter>.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

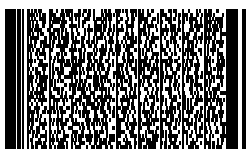
National Benefits Center
U. S. CITIZENSHIP & IMMIGRATION SVC
P.O. Box 648003
Lee's Summit MO 64002

USCIS Contact Center: www.uscis.gov/contactcenter



Biometric Notification		APPLICATION/PETITION/REQUEST NUMBER		NOTICE DATE
CASE TYPE	IOE0908647692			03/13/2020
N400 - APPLICATION FOR NATURALIZATION	SOCIAL SECURITY NUMBER	USCIS A#	CODE	
ACCOUNT NUMBER	TCR	A208 075 457	5	
097208602371		SERVICE CENTER	PAGE	
		NBC	1 of 1	

JOFF STENN WROY PHILOSSAINT
c/o ALEX TELFORT
MIAMI FL



To process your application, USCIS must capture your biometrics and have your fingerprints cleared by the FBI. The photo taken may be used on your naturalization certificate. **PLEASE APPEAR AT THE BELOW APPLICATION SUPPORT CENTER AT THE DATE AND TIME SPECIFIED.** If you are unable to do so, complete the bottom of this notice and return the entire original notice to the address below. **RESCHEDULING YOUR APPOINTMENT WILL DELAY YOUR APPLICATION. IF YOU FAIL TO APPEAR AS SCHEDULED BELOW OR FAIL TO REQUEST RESCHEDULING, YOUR APPLICATION WILL BE CONSIDERED ABANDONED.**

APPLICATION SUPPORT CENTER	PLEASE READ THIS ENTIRE NOTICE CAREFULLY.
USCIS NORTH MIAMI 1620 NE 163rd Street North Miami Beach FL 33162	DATE AND TIME OF APPOINTMENT 03/31/2020 10:00AM

WHEN YOU GO TO THE APPLICATION SUPPORT CENTER TO HAVE YOUR BIOMETRICS TAKEN, YOU MUST BRING:
1. THIS APPOINTMENT NOTICE and
2. PHOTO IDENTIFICATION. Naturalization applicants must bring their Alien Resident Card. All other applicants must bring a passport, driver's license, national ID, military ID, or State-issued photo ID. If you appear without proper identification, you will not be fingerprinted.

NOTE: USCIS may use your fingerprints to check the criminal history records of the FBI. You may obtain a copy of your own FBI identification record using the procedures outlined within Title 28 C.F.R., Section 16.32. The procedures to change, correct, or update your FBI identification record are outlined within Title 28, C.F.R., Section 16.34.

NOTE: If the USCIS ASC is **closed** due to inclement weather or for other unforeseen circumstances, USCIS will **automatically reschedule** your appointment for the next available appointment date and mail you a notice with the new date and time.


PLEASE DISREGARD THIS NOTICE IF YOUR APPLICATION HAS ALREADY BEEN GRANTED.

USCIS has a free booklet to help you study for the naturalization test. Ask about 'Learn About the United States: Quick Civics Lessons' when you go to have your fingerprints taken at the Application Support Center.

NO CELL PHONES, CAMERAS, OR OTHER RECORDING DEVICES PERMITTED.

REQUEST FOR RESCHEDULING
☐ **Please reschedule my appointment.** Once USCIS receives your request, you will be sent a new appointment notice. Make a copy of this notice for your records, then mail the original with your request to BPU, Alexandria ASC, Suite 100, 8850 Richmond Hwy, Alexandria, VA 22309-1586

APPLICATION NUMBER
N400 - IOE0908647692



If you have any questions regarding this notice, please contact the USCIS Contact Center at 1-800-375-5283.

WARNING: Due to limited seating availability in our lobby area, only persons who are necessary to assist with transportation or completing the biometrics worksheet should accompany you. If you have open wounds or bandages/casts when you appear, the USCIS may reschedule your appointment if it is determined your injuries will interfere with taking your biometrics.

Biometric Notification		CASE TYPE	NOTICE DATE
APPLICATION/PETITION/REQUEST NUMBER IOE0908647692		N400 - APPLICATION FOR NATURALIZATION	10/03/2020
ACCOUNT NUMBER 097208602371		TCR	USCIS A# A208 075 457 SERVICE CENTER NBC
JOFF STENN WROY PHILOSSAINT c/o ALEX TELFORT [REDACTED]		[REDACTED]	
To process your application, USCIS must capture your biometrics and have your fingerprints cleared by the FBI. The photo taken may be used on your naturalization certificate. PLEASE APPEAR AT THE BELOW APPLICATION SUPPORT CENTER AT THE DATE AND TIME SPECIFIED. If you are unable to do so, complete the bottom of this notice and return the entire original notice to the address below. RESCHEDULING YOUR APPOINTMENT WILL DELAY YOUR APPLICATION. IF YOU FAIL TO APPEAR AS SCHEDULED BELOW OR FAIL TO REQUEST RESCHEDULING, YOUR APPLICATION WILL BE CONSIDERED ABANDONED.			
APPLICATION SUPPORT CENTER USCIS NORTH MIAMI 1620 NE 163rd Street North Miami Beach FL 33162		PLEASE READ THIS ENTIRE NOTICE CAREFULLY. DATE AND TIME OF APPOINTMENT 10/28/2020 08:00AM	
WHEN YOU GO TO THE APPLICATION SUPPORT CENTER TO HAVE YOUR BIOMETRICS TAKEN, YOU MUST BRING: 1. THIS APPOINTMENT NOTICE and 2. PHOTO IDENTIFICATION. Naturalization applicants must bring their Alien Resident Card. All other applicants must bring a passport, driver's license, national ID, military ID, or State-issued photo ID. If you appear without proper identification, you will not be fingerprinted.			
NOTE: USCIS may use your fingerprints to check the criminal history records of the FBI. You may obtain a copy of your own FBI identification record using the procedures outlined within Title 28 C.F.R., Section 16.32. The procedures to change, correct, or update your FBI identification record are outlined within Title 28, C.F.R., Section 16.34.			
NOTE: If the USCIS ASC is closed due to inclement weather or for other unforeseen circumstances, USCIS will automatically reschedule your appointment for the next available appointment date and mail you a notice with the new date and time.			
PLEASE DISREGARD THIS NOTICE IF YOUR APPLICATION HAS ALREADY BEEN GRANTED.			
USCIS has a free booklet to help you study for the naturalization test. Ask about 'Learn About the United States: Quick Civics Lessons' when you go to have your fingerprints taken at the Application Support Center.			
NO CELL PHONES, CAMERAS, OR OTHER RECORDING DEVICES PERMITTED.			
REQUEST FOR RESCHEDULING <input type="checkbox"/> Please reschedule my appointment. Once USCIS receives your request, you will be sent a new appointment notice. Make a copy of this notice for your records, then mail the original with your request to BPU, Alexandria ASC, Suite 100, 8850 Richmond Hwy, Alexandria, VA 22309-1586			
APPLICATION NUMBER N400 - IOE0908647692 [REDACTED]			
If you have any questions regarding this notice, please contact the USCIS Contact Center at 1-800-375-5283.			
WARNING: Due to limited seating availability in our lobby area, only persons who are necessary to assist with transportation or completing the biometrics worksheet should accompany you. If you have open wounds or bandages/casts when you appear, the USCIS may reschedule your appointment if it is determined your injuries will interfere with taking your biometrics.			



ATTENTION

Important Changes to Biometrics Services Appointments Related to COVID-19

As USCIS resumes biometrics services at our Application Support Centers (ASC), we want to protect the safety of our workforce and you. **Please read the entirety of this notice, do not come to your appointment if you are feeling sick, and follow all instructions below:**

Appointments

- Only appear on your scheduled date and time. You will not be processed if you appear on a different date or at a different time. Only military members will be processed as walk-ins.
- Do not arrive more than 15 minutes before your appointment.
- Complete the attached Applicant Information Worksheet and bring it to your appointment. This information is needed to complete the biometric collection process.
- If you are ill, you should reschedule your appointment. Follow the instructions on your appointment notice to reschedule.
- On the day of your appointment, please check the status of our offices. Office status information can be located here: www.uscis.gov/about-us/uscis-office-closings.

Face coverings and Social Distancing:

- In order to enter the facility, you must wear a face covering while visiting the ASC. USCIS may deny entry if you do not wear a face covering.
- Do not bring additional individuals or family members with you to your appointment. Only interpreters, attorneys or those providing needed assistance to you will be permitted to accompany you, and will be required to wear a face covering.
- You will be required to follow social distancing guidance when you arrive, such as sitting and standing apart from others.

APPLICANT'S INFORMATION WORKSHEET (AIW)


NAME:																										
FIRST	MIDDLE	LAST																								
LIST ANY OTHER NAMES USED (MAIDEN NAME, PREVIOUS MARRIAGE, ALIAS, ETC.):																										
1)	FIRST	MIDDLE LAST																								
2)	FIRST	MIDDLE LAST																								
DATE OF BIRTH:																										
MONTH	DAY	YEAR																								
COUNTRY OF BIRTH:		COUNTRY OF CITIZENSHIP:																								
<table border="0"> <tr> <td>GENDER: (CHECK ONE)</td> <td>RACE: (CHECK ONE)</td> <td><input type="checkbox"/> NATIVE AMERICAN</td> </tr> <tr> <td><input type="checkbox"/> MALE</td> <td><input type="checkbox"/> ASIAN</td> <td><input type="checkbox"/> UNKNOWN</td> </tr> <tr> <td><input type="checkbox"/> FEMALE</td> <td><input type="checkbox"/> BLACK</td> <td></td> </tr> <tr> <td><input type="checkbox"/> OTHER</td> <td><input type="checkbox"/> CAUCASIAN/LATINO</td> <td></td> </tr> </table>			GENDER: (CHECK ONE)	RACE: (CHECK ONE)	<input type="checkbox"/> NATIVE AMERICAN	<input type="checkbox"/> MALE	<input type="checkbox"/> ASIAN	<input type="checkbox"/> UNKNOWN	<input type="checkbox"/> FEMALE	<input type="checkbox"/> BLACK		<input type="checkbox"/> OTHER	<input type="checkbox"/> CAUCASIAN/LATINO													
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		KILOGRAMS																								

When you provide your digital signature, you will be attesting to the following:

I declare under penalty of perjury that I have reviewed and understand the document(s) identified by the receipt number displayed on the screen above, and that all the information in these materials is complete, true, and correct. This includes any application, petition, or request that I submitted, that I provided on behalf of my derivative beneficiary; that was submitted on my behalf; and supporting documents, applications, petitions, or requests filed with my application, petition, or request that I (or my attorney or accredited representative) filed with USCIS, or that was filed on my behalf.

RETURN "AIW" TO APPLICANT

AIW: REVISED 5/15/2019

	Receipt Number JOE0908647692 Received Date 03/10/2020 Notice Date 11/06/2020	USCIS Online Account Number 097208602371 Priority Date Page 1 of 2	Case Type N400 - APPLICATION FOR NATURALIZATION Applicant A208 075 457 JOFF STENN WROY PHILOSSAINT
-----------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------

JOFF STENN WROY PHILOSSAINT
c/o ALEX TELFORT
[REDACTED]
MIAMI FL [REDACTED]

Please come to:

USCIS Hialeah Field Office
5880 NW 183rd Street, Main Lobby
HIALEAH, FL 33015
USA

On (Date): Tuesday, December 15, 2020
At (Time): 07:45AM

You are hereby notified to appear for an interview on your Application for Naturalization at the date, time, and place indicated above. The proceeding will take about two hours.

To ensure visitor and employee health and safety, please pay special attention to the sections entitled, "COVID-19 Safety Precautions" and "Who should come with you?"

YOU MUST APPEAR FOR THIS INTERVIEW - However, if you are ill, have any symptoms of illness, have traveled outside the United States within the past two weeks or had contact with a person who tested positive for COVID-19 within the past two weeks, or are at heightened risk due to age or an underlying health condition, call the U.S. Citizenship and Immigration Services (USCIS) Contact Center at 1-800-375-5283 (TTY 1-800-767-1833) as soon as possible to reschedule your appointment. There is no penalty for requesting that your appointment be rescheduled.

COVID-19 Safety Precautions - To ensure the health and safety of all who enter USCIS offices, you must take the following safety precautions when arriving for your interview:

- DO NOT arrive more than 15 minutes prior to your interview time. You will not be permitted entry into the office until 15 minutes before your interview.
- You and anyone permitted to come with you to your interview (as explained in the section, "Who should come with you?" below) must wear a face covering that covers the mouth and nose.
- Bring a black or blue ink pen with you to your interview.

Who should come with you? Only the following people may come with you to your interview:


- If you do not speak English fluently, you should arrange to have an interpreter available by phone. Do not bring an interpreter to the interview. If you need a Sign Language Interpreter or Certified Deaf Interpreter, call the USCIS Contact Center at 1-800-375-5283 as soon as possible.
- Your attorney or authorized representative may come with you to the interview, or be available via phone.
- If you have a disability and have an individual who assists you, that individual may come with you.

If you are applying for citizenship for yourself, you will be tested on your knowledge of the government and history of the United States. You will also be tested on reading, writing, and speaking English, unless on the day you filed your application, you have been living in the United States for a total of at least 20 years as a lawful permanent resident and are over 50 years old, or you have been living in the United States for a total of 15 years as a lawful permanent resident and are over 55 years old, or unless you have a medically determinable disability.


Please see the additional information on the back. You will be notified separately about any other cases you filed.

HIALEAH FL FIELD OFFICE
U. S. CITIZENSHIP & IMMIGRATION SVC
5880 NW 183RD STREET
MAIN LOBBY 1ST FLOOR
HIALEAH FL 33015
USCIS Contact Center: www.uscis.gov/contactcenter

A Number



Receipt Number





Receipt Number IOE0908647692	USCIS Online Account Number 097208602371	Case Type N400 - APPLICATION FOR NATURALIZATION
Received Date 03/10/2020	Priority Date	Applicant A208 075 457 JOFF STENN WROY PHILOSSAINT
Notice Date 11/06/2020	Page 2 of 2	

You MUST BRING the following with you to the interview:

- This letter.
- Your Alien Registration Card ("green card").
- Any evidence of Selective Service Registration.
- Your passport and/or any other documents you used in connection with any entries into the United States.
- Those items noted below which are applicable to you:

If applying for NATURALIZATION AS THE SPOUSE of a United States Citizen;

- Your marriage certificate.
- Proof of death or divorce for each prior marriage of yourself or spouse.
- Your spouse's birth or naturalization certificate or certificate of citizenship.

If applying for NATURALIZATION as a member of the United States Armed Forces;

- Your discharge certificate, or form DD214.

If copies of a document were submitted as evidence with your N400 application, the originals of those documents should be brought to the interview.

PLEASE keep this appointment, even if you do not have all the items indicated above.

To request a disability accommodation, go to www.uscis.gov/accommodations or call the USCIS Contact Center at 1-800-375-5283 (TTY: 1-800-767-1833) as soon as possible, **even if you indicated on your application that you require an accommodation.**

If you have any questions or comments regarding this notice or the status of your case, please contact the USCIS Contact Center toll free at 1-800-375-5283. If you are hearing impaired, please call the USCIS Contact Center TTY at 1-800-767-1833.

Please see the additional information on the back. You will be notified separately about any other cases you filed.

HIALEAH FL FIELD OFFICE
U. S. CITIZENSHIP & IMMIGRATION SVC
5880 NW 183RD STREET
MAIN LOBBY 1ST FLOOR
HIALEAH FL 33015

USCIS Contact Center: www.uscis.gov/contactcenter



December 15, 2020

JOFF STENN WROY PHILOSSAINT
[REDACTED] E
MIAMI, FL [REDACTED]

RE: N-400, Application for Naturalization

U.S. Department of Homeland Security
U.S. Citizenship and Immigration Services
5880 NW 183rd Street
Hialeah, FL 33015



U.S. Citizenship
and Immigration
Services



IOE0908647692



A208-075-457

NOTICE OF CONTINUANCE

Dear JOFF STENN PHILOSSAINT

Examination of your N-400 application shows that additional information, documents or forms are needed before your application can be acted upon. **Please see attached and respond by January 19, 2021.**

Failure to do so may result in the denial of your application.

Submission of this information, however, does not guarantee that this case will be approved. We strongly recommend that you submit all the requested information, documents, or forms as listed on the following pages at one time and as soon as possible so that we can resume processing. Any interim benefits that may otherwise stem from the filing of this application or petition will be delayed while this case is in suspense awaiting your response.

If you choose to submit only some or none of the requested information, then the application will be adjudicated on its merits. You may also request, in writing, to the Service that this application be withdrawn. If the District Director consents to the withdrawal, the application will be denied without further notice to you and without prejudice to any future application. If the District Director does not consent to the withdrawal, then the application shall be adjudicated on its merits.

You must either mail all the requested information to the address shown below or scan and upload your response using your USCIS online account (if applicable) by January 19, 2021.

Sincerely,

Enid S. Stulz
Director

HIA-N400FQDN14000016683532

1 of 2

www.uscis.gov

Attachment

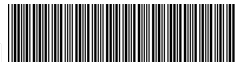
Please include a copy of this letter and send your response by mail to this address:

**U.S. Citizenship and Immigration Services
Hialeah Field Office
5880 NW 183rd Street
Hialeah, FL 33015**

If you have dependent children who do not live with you, submit the following:

- Evidence that you support each dependent child from 3/10/2017- present ;
- Copies of any court or government order to provide financial support to your biological, step, or adoptive child(ren); and
- If there is a court or government order, evidence that you have complied with the court or government order, such as cancelled checks, money order receipts, and/or a court or agency printout of child support payments or evidence of wage garnishments.
- See the attached instructions.

cc:



IOE0908647692




A208-075-457

HLAN400FOEN14000016683532

2 of 2

www.uscis.gov

Notice of Naturalization Oath Ceremony		USCIS Form N-445 OMB No. 1615-0054 Expires 10/31/2022
 Department of Homeland Security U.S. Citizenship and Immigration Services		
A-Number A208 075 457 JOFF STENN WROY PHILOSSAINT	Date 02/04/2021	
JOFF STENN WROY PHILOSSAINT c/o ALEX TELFORT [REDACTED] MIAMI FL [REDACTED]		
U.S. Citizenship and Immigration Services (USCIS) thanks you for your interest in becoming a United States citizen. You must now appear at a Naturalization Oath Ceremony to complete the naturalization process.		
You are scheduled to appear for a Naturalization Oath Ceremony on: Date and Time: Tuesday, February 09, 2021 at 10:30AM Location: USCIS Hialeah Field Office 5880 NW 183rd Street, Main Lobby HIALEAH FL 33015	Please bring the following with you: <ul style="list-style-type: none">• This notice with the reverse side completed. Please refer to instructions below.• All Permanent Resident Cards ("green card") that you may have, valid or expired.• All Reentry Permits or Refugee Travel Documents that you may have, valid or expired.• Any other documents USCIS issued to you that you may have, such as employment authorization cards, valid or expired.	
If you are ill, have any symptoms of illness, have traveled outside the United States within the past two weeks or had contact with a person who tested positive for COVID-19 within the past two weeks, or are at heightened risk due to age or an underlying health condition, call the U.S. Citizenship and Immigration Services (USCIS) Contact Center at 1-800-375-5283 (TTY 1-800-767-1833) as soon as possible. There is no penalty for requesting that your oath ceremony be rescheduled.		
COVID-19 Safety Precautions - To ensure the health and safety of all who enter USCIS offices, you must take the following safety precautions when arriving for your ceremony: <ul style="list-style-type: none">• DO NOT arrive more than 30 minutes prior to your ceremony time. You will not be permitted entry into the office until 30 minutes before your ceremony.• You and anyone permitted to come with you to your ceremony (as explained in the section, "Who should come with you?" below) must wear a face covering that covers the mouth and nose.• Bring a black or blue ink pen with you to your oath ceremony.		
Who should come with you? <ul style="list-style-type: none">• If you do not speak English fluently, you may have an interpreter available via phone. If you need a Sign Language Interpreter or Certified Deaf Interpreter, call the USCIS Contact Center at 1-800-375-5283 (TTY 1-800-767-1833) as soon as possible.• If you have a disability and have an individual who assists you, that individual may come with you to the ceremony.• For the safety and health of everyone, no guests will be permitted.		
The naturalization ceremony is a solemn and meaningful event. USCIS asks that you dress in proper attire to respect the dignity of this event. If you cannot come to this ceremony, for a reason other than noted above, return this notice immediately with a written explanation on why you cannot attend to the office with jurisdiction over your naturalization case. To find the correct office with jurisdiction over your naturalization case, visit the following website for more information: www.uscis.gov/about-us/find-uscis-office . You will then receive an appointment for a ceremony at a later date. If you are in the military, you may contact the USCIS Military Help Line for assistance, at 877-247-4645.		
To request a disability accommodation, go to www.uscis.gov/accommodations or call the USCIS Contact Center at 1-800-375-5283 (TTY: 1-800-767-1833) as soon as possible. For more information, visit www.uscis.gov/accommodationsinfo .		
Form N-445 10/21/19 - N	Page 1 of 4	

Instructions

You MUST bring the completed questionnaire on Page 4 with you to the Naturalization Oath Ceremony, along with the documents listed above. You are required to give these items to an employee of USCIS at the oath ceremony.

Print clearly in black ink. Please read these instructions before answering the questions, which concern events that may have occurred since your interview. Answer the following questions on the day of your Naturalization Oath Ceremony, before you attend the ceremony. Please note that these questions do not refer to any events that happened *before* your naturalization interview. These questions refer to the time period *after* your interview at the USCIS office. For example, if you were married at the time of your interview and there has been no change in your marital status since your interview, select "NO" to **Item Number 1** below. If you traveled outside the United States *after* your interview, select "YES" to **Item Number 2** below. Additionally, if you answer "YES" to any of the questions, bring documents to support your answers. For example, if you married or divorced after your interview, bring your marriage certificate or divorce decree. If you traveled outside of the United States, bring travel related documents. If you were arrested after your interview, bring your arrest records and court dispositions. If you were serving in the military and have been discharged, bring your DD214 or other discharge papers.

After you have answered each question, print the date and the location (city and state) where you completed the questionnaire. The date when you completed the questionnaire should be the same as the date of your Naturalization Oath Ceremony. Also, sign the questionnaire and print your current address. If you used anyone as an interpreter to read the Instructions and questions on this form to you in a language in which you are fluent, the interpreter must fill out the section titled "Interpreter's Contact Information, Certification, and Signature," provide his or her name, the name and address of his or her business or organization (if any), his or her daytime telephone number, his or her mobile telephone number (if any), and his or her email address (if any). The interpreter must sign and date the form.

Interpreter's Contact Information, Certification, and Signature



Provide the following information concerning the interpreter.

Interpreter's Full Name

1. Interpreter's Family Name (Last Name) Interpreter's Given Name (First Name)

2. Interpreter's Business or Organization Name (if any)

Interpreter's Mailing Address

3. Street Number and Name Apt. Ste. Flr. Number

City or Town State ZIP Code

Province Postal Code Country

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number 5. Interpreter's Mobile Telephone Number (if any)

6. Interpreter's Email Address (if any)


Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and , which is the same language in which the applicant is fluent, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question and answer on the application, and has verified accuracy of every answer.

Interpreter's Signature

7. Interpreter's Signature Date of Signature (mm/dd/yyyy)

For USCIS Use Only	PRC Not Collected. Provide reason:	 Name of Applicant JOFF STENN WROY PHILOSSAINT A-Number A208 075 457
	<input type="checkbox"/> Card was lost/stolen, destroyed or mutilated.	
	<input type="checkbox"/> Never received card	
	<input type="checkbox"/> Never issued a card (such as certain members of the U.S. Armed Forces and U.S. nationals)	
	<input type="checkbox"/> Other: _____ FCO: _____	

Answer the following questions on the day of your Naturalization Oath Ceremony. For more information, refer to Page 2 of this notice for detailed instructions.

1. Since your interview, have you married, or been widowed, separated or divorced? ☐ Yes ☐ No
2. Since your interview, have you traveled outside the United States? ☐ Yes ☐ No
3. Since your interview, have you committed any crime or offense, for which you have not been arrested? ☐ Yes ☐ No
4. Since your interview, have you been arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking or violating any law or ordinance, including traffic violations? ☐ Yes ☐ No
5. Since your interview, have you joined, become associated, or connected with any organization in any way, including the Communist Party, a totalitarian organization, or terrorist group? ☐ Yes ☐ No
6. Since your interview, have you deserted from, claimed exemption from, or been separated or discharged from military service? ☐ Yes ☐ No
7. Since your interview, has there been any change in your willingness to bear arms on behalf of the United States; to perform non-combatant service in the armed forces of the United States; or to perform work of national importance under civilian direction if the law requires it? ☐ Yes ☐ No
8. Since your interview, have you practiced polygamy, received income from illegal gambling, been involved in prostitution, helped anyone enter the United States illegally, trafficked controlled substances, given false testimony to obtain immigration benefits, or been a habitual drunkard? ☐ Yes ☐ No

I certify under penalty of perjury that each answer provided above was made by me or at my direction, that I reviewed and understand all of the questions and answers provided, and that each answer is true and correct as of the date of my Naturalization Oath Ceremony.

Signed at City and State _____ on (Date) _____

Signature _____

Mailing Address: Street Number and Name _____ Apt. _____ Ste. _____ Flr. _____ Number _____

City or Town _____ State _____ ZIP Code _____

DHS Privacy Notice

AUTHORITIES: The information requested on this form, and the associated evidence, is collected under the Immigration and Nationality Act (INA) sections 101(f), 313, 316, 332, 334, 335 and 336.

PURPOSE: The primary purpose for providing the requested information on this form is to determine if you have maintained good moral character and continued eligibility for naturalization from the date of your last interview until the naturalization ceremony. DHS uses the information you provide to assess your continuing eligibility for the immigration benefit you are seeking.

DISCLOSURE: The information you provide is voluntary. However, failure to provide the requested information, including your Social Security number (if applicable), and any requested evidence, may delay a final decision or result in denial of your application for an immigration benefit.

ROUTINE USES: DHS may share the information you provide on this form and any additional requested evidence with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS-USCIS-001 - Alien File, Index, and National File Tracking System and DHS-USCIS-007 - Benefits Information System] and the published privacy impact assessments [DHS/USCIS/PIA-015 Computer Linked Application Information Management System 4 and DHS/USCIS/PIA-056 USCIS Electronic Immigration System] which you can find at www.dhs.gov/privacy. DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.

Paperwork Reduction Act

An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated at 10 minutes per response, including the time for reviewing instructions, gathering the required documentation and information, completing the notice, preparing statements, attaching necessary documentation, and submitting the notice. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Avenue, NW, Washington, DC 20529-2140; OMB No 1615-0054. **Do not mail your completed Form N-445 to this address.**

Form N-445 10/21/19 N

Page 4 of 4

Risk and Fraud

This section contains sensitive law enforcement data that has been withheld from this Certified True Copy.



Case Flags

Case Flags

Flag Status	Flag Type	Flag Description	Flag Creation	Flag Update(s)
Inactive	INFORMATION	Applicant did not provide occupation for at least one current employment record Detailed description: None provided	2020-10-28 08:22:16.771 by: ELIS INTERNAL	2020-10-28 08:22:24.364 by: ELIS INTERNAL
Inactive	INFORMATION	Applicant did not provide occupation for at least one current employment record Detailed description: None provided	2020-10-28 08:22:30.227 by: ELIS INTERNAL	2020-12-15 08:50:15.763 by: VANCOTT, WALKIRIA
Inactive	INFORMATION	Total number of days outside U.S. listed by the applicant does not match the number of days calculated by the system based on the declared dates for each trip Detailed description: Applicant listed 32 days outside the U.S.; System calculated 16 days outside the U.S.	2020-03-13 08:06:44.284 by: ELIS INTERNAL	2020-10-28 08:22:24.364 by: ELIS INTERNAL
Inactive	INFORMATION	Total number of days outside U.S. listed by the applicant does not match the number of days calculated by the system based on the declared dates for each trip Detailed description: Applicant listed 32 days outside the U.S.; System calculated 16 days outside the U.S.	2020-10-28 08:22:30.468 by: ELIS INTERNAL	2020-12-15 08:50:15.763 by: VANCOTT, WALKIRIA
Inactive	INFORMATION	Total number of days outside U.S. listed by the applicant does not match the number of days calculated by the system based on the declared dates for each trip Detailed description: Applicant listed 32 days outside the U.S.; System calculated 16 days outside the U.S.	2020-12-15 08:50:20.296 by: VANCOTT, WALKIRIA	2020-12-15 10:21:55.137 by: VANCOTT, WALKIRIA
Inactive	INFORMATION	Total number of days outside U.S. listed by the applicant does not match the number of days calculated by the system based on the declared dates for each trip Detailed description: Applicant listed 32 days outside the U.S.; System calculated 16 days outside the U.S.	2020-12-15 10:21:59.944 by: VANCOTT, WALKIRIA	2021-02-04 11:23:15.8 by: VANCOTT, WALKIRIA
Inactive	INFORMATION	Total number of days outside U.S. listed by the applicant does not match the number of days calculated by the system based on	2021-02-04 11:23:21.681 by: VANCOTT,	2021-02-04 11:24:33.666 by: VANCOTT,

		the declared dates for each trip	WALKIRIA	WALKIRIA
		Detailed description: Applicant listed 32 days outside the U.S.; System calculated 16 days outside the U.S.		
Active	INFORMATION	Total number of days outside U.S. listed by the applicant does not match the number of days calculated by the system based on the declared dates for each trip	2021-02-04 11:24:38.963 by: VANCOTT, WALKIRIA	2021-02-04 11:24:38.963 by: VANCOTT, WALKIRIA
Inactive	INFORMATION	Applicant may not have provided the required evidence	2020-03-13 08:04:05.653 by: ELIS INTERNAL	2020-10-28 08:22:24.364 by: ELIS INTERNAL
Inactive	INFORMATION	Detailed description: Forms not provided: I551 Alien Registration Card		
Inactive	INFORMATION	Applicant may not have provided the required evidence	2020-10-28 08:22:24.992 by: ELIS INTERNAL	2020-12-15 08:50:15.763 by: VANCOTT, WALKIRIA
Inactive	INFORMATION	Detailed description: Forms not provided: I551 Alien Registration Card		
Inactive	INFORMATION	Applicant may not have provided the required evidence	2020-12-15 08:50:16.135 by: VANCOTT, WALKIRIA	2020-12-15 10:21:55.137 by: VANCOTT, WALKIRIA
Inactive	INFORMATION	Detailed description: Forms not provided: I551 Alien Registration Card		
Inactive	INFORMATION	Applicant may not have provided the required evidence	2020-12-15 10:21:55.584 by: VANCOTT, WALKIRIA	2021-02-04 11:23:15.8 by: VANCOTT, WALKIRIA
Inactive	INFORMATION	Detailed description: Forms not provided: I551 Alien Registration Card		
Inactive	INFORMATION	Applicant may not have provided the required evidence	2021-02-04 11:23:16.395 by: VANCOTT, WALKIRIA	2021-02-04 11:24:33.666 by: VANCOTT, WALKIRIA
Active	INFORMATION	Detailed description: Forms not provided: I551 Alien Registration Card		
Inactive	INFORMATION	Applicant may not have provided the required evidence	2021-02-04 11:24:34.235 by: VANCOTT, WALKIRIA	2021-02-04 11:24:34.235 by: VANCOTT, WALKIRIA
Inactive	INFORMATION	Detailed description: Forms not provided: I551 Alien Registration Card		
Inactive	INFORMATION	Applicant did not provide occupation for at least one employment history record	2020-10-28 08:22:16.752 by: ELIS INTERNAL	2020-10-28 08:22:24.364 by: ELIS INTERNAL
Inactive	INFORMATION	Detailed description: None provided		
Inactive	INFORMATION	Applicant did not provide occupation for at least one employment history record	2020-10-28 08:22:30.199 by: ELIS INTERNAL	2020-12-15 08:50:15.763 by: VANCOTT,

Detailed description: None provided

WALKIRIA



Payment Information

Fee Type	Date	Method	Amount	Status	Settled Date
Form Fee	03/13/2020	Personal Check	\$640.00	Collected	None
Biometric Fees	03/13/2020	Personal Check	\$85.00	Collected	None

